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STATE GE CALIFORNA - DESCRIPTION ADMINI	STRATIVE LAW	UDMICOLON	(See instructions on	For use by Secretary of State only
NOTICE PUBLICATION STD. 400 (REV. 14)	REGULATIONS S	ORWISSION	reverse)	
AGENCY			AGENCY FILE NUMBER (If any)	
	MENT OF SOCIAL SEI		RDB #1294-44	
OAL FILE NOTICE FILE NUMBER NUMBERS	REGULATORY ACTION NUMBER 95-0501-03C	EMERGENCY NUMBER 94-1228-01E	PREVIOUS REGULATORY ACTION NUMBER 94-1114-01S	
	For use by Office of Administrat			FILED
			t w	Im the office of the Secretary of State of California
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		4.50	OFFIG. C	JUN _ 8 1995
		ADMI	ISTRATIVE LAW	4:20
			NDORSED	At 7.20 D'clock M.
		APPRO	VED FOR FILING PUBLICATION	BILL JONES, Secretary of Shale
		PARTU	PUBLICATION	Dequity &
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NOTICE		REGI	8 995	
	105 /0	L		
A. PUBLICATION OF NOTICE	CE (Complete for publ	TITLE(S)	gister)	2. REQUESTED PUBLICATION DATE
Adoption Service Prov	ider Registration		3509 4.1 aw	E. NEGOLOVIES V OSCIONION SAIL
3. NOTICE TYPE Notice re Proposed		4. AGENCY CONTACT PERS	CON	TELEPHONE NUMBER
Regulatory Action	Other		NOTICE REGISTER NUMBER	PUBLICATION DATE
OAL USE ONLY ACTION ON PROPOSED N Approved as Submitted	Approved as Modified	Disapproved/ Withdrawn	94,431-2	8-5-94
B. SUBMISSION OF REGU	LATIONS (Complete w	vhen submitting regu	ılations)	,
1. SPECIFY CALIFORNIA CODE C	F REGULATIONS TITLE(S)	AND SECTION(S) (Inclu	ding title 26, if toxics-related	d)
Title 22 and MPP	ADOPT			
	AMEND			
SECTIONS	Section 35094.1	(a)(3)		
AFFECTED	REPEAL			
2. TYPE OF FILING				
Regular Rulemaking (Gov.	La Bearing regus (1995)	Changes Without	Regulatory Effect	Emergency (Gov. Code,
Code, § 11346)	Resubmittal AND	(Cal. Code Regs.,		§ 11346.1(b))
	agency officer named below of		emplied with the provisions of o	Government Code §§ 11346.4 - 11346.8
prior to, or within 120 days of, th	le effective date of the regulation	ons listed above.		
Print Only 3. DATE(S) OF AVAILABILITY OF MODIFIED	Other (specify)	DOED TO THE BUILDING	II E (Oal Cada Dara title I SS 44 an	445
February 10, 1995 t			ILE (Cal. Code Hegs. IIIIe I, 99 44 an	0 43)
4. EFFECTIVE DATE OF REGULATORY CHA	NGES (Gov. Code § 11346.2)			
Effective 30th day after filling with Secretary of State	X Effective on filing with Secretary of State	Effective other (Specify)	4	
5. CHECK IF THESE REGULATIONS REQUIR Department of Finance (Form S		Fair Political Pract		State Fire Marshal
	.5.550/	Tail Foliacai Flac		State Fire Walshai
Other (Specify)				
6. CONTACT PERSON Frank P. Vitulli Chi	of Office of Poss	lations Dovolo	mont	TELEPHONE NUMBER
Frank R. Vitulli, Chi	er, orrice or kegu	Tations Develo) III CII C	(916) 657–2586
-	d copy of the regulation			
	on specified on this form the head of the agency, a			
SIGNATURE OF AGENCY HEAD OR DESIGN		and an additionzed t	and this definitionion	DATE
& Claise An	duso			3-1-95
TYPED NAME AND TITLE OF SIGNATORY	vootov			
ELOISE ANDERSON, Di	rector			
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NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

RESUBMITTAL OF DISAPPROVED OR WITHDRAWN REGULATIONS

When resubmitting previously disapproved or withdrawn regulations to OAL for review, use a new STD. 400 and fill out Part B, including the signed certification. Enter the number of the previously disapproved or withdrawn filing in the box marked

"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

Amend Section 35094.1 to read:

35094.1 ADOPTION SERVICE PROVIDER REGISTRATION AND DUTY OF CARE 35094.1

- (a) (Continued)
 - (1) (Continued)
 - (2) (Continued)
 - (3) No individual shall be registered unless he or she possesses the required license and experience.
 - (A) If an individual has been registered and the department subsequently determines that he or she in fact lacks the required license and/or experience, registration of the individual shall be terminated.
 - (1) Prior to terminating the registration of an individual adoption service provider, the department shall mail the adoption service provider a written notice of termination and the reason(s) for the termination.
 - (B) The department shall not terminate the registration if, within fifteen working days after the department mails the notice, the adoption service provider mails a written response providing additional information verifying that the license and/or experience meets the requirements in Section 35094.1(a).
 - (C) If the additional information provided by the adoption service provider does not meet the license and/or experience requirements in Section 35094.1(a), the department shall terminate the registration.
- (b) (Continued)
 - (1) (Reserved)
- (c) (Reserved)

Authority Cited: Section 8621, Family Code; and Sections 10553 and 10554, Welfare and Institutions Code.

Reference: Sections 8502 and 8801.7, Family Code.

STATE DECIL FORMA OFFICE OF A MIN NOTICE PUBLICATO STD. 400 (REV. 2-91) AGENCY	ISTANCE TO SE	епвинженои	(See instructions on reverse) AGENCY FILE NUMBER (If any)	For use by Secretary of State only		
California Departmen	t of Social Servi	.ces	0794-23			
OAL FILE NOTICE FILE NUMBER	REGULATORY ACTION NUMBER	EMERGENCY NUMBER	PREVIOUS REGULATORY ACTION NUMBER	FILED		
NUMBERS	95-0421-01N	/		In the office of the Secretary of State		
	For use by Office of Administr	rative Law (OAL) only		of the State of California		
		1995 APR	27 /110:35	JUN9 1995		
		ADMINIST	RAHENDORSED APPROVED FOR FILING AND PUBLICATION	At 3:17 O'clock of M. BILL JONES, Secretary of Mate By Collect on one		
			JUN 9 1995	Deputy 6		
NOTICE			ILATIONS			
A. PUBLICATION OF NOT	ICE (Complete for put	Offication in Notice Red	ce of Administrative Law			
1. TOPIC OF NOTICE Division 8 Demonstration Project	39,	TITLE(S)	FIRST SECTION AFFECTED.	2. REQUESTED PUBLICATION DATE		
3. NOTICE TYPE Notice re Proposed	Other	4. AGENCY CONTACT PERS	SON	TELEPHONE NUMBER		
OAL USE ACTION ON PROPOSED ONLY Approved as Submitted	Other NOTICE Approved as Modified	Disapproved/ Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE		
1 Dominios			·lotions\			
	B. SUBMISSION OF REGULATIONS (Complete when submitting regulations) 1. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics-related) ADOPT AMEND 89–102, 89–300, 89–301, 89–400, 89–402, 89–500,					
AFFECTED	89-501, 89-502, REPEAL	69-505, and 69-5	004			
2. TYPE OF FILING	,>					
Regular Rulemaking (Gov. Code, § 11346)	Resubmittal	Changes Without I (Cal. Code Regs.,		Emergency (Gov. Code, § 11346.1(b))		
Certificate of Compliance: The prior to, or within 120 days of t	agency officer named below he effective date of the regula	certifies that this agency co	mplied with the provisions of C	Sovernment Code §§ 11346.4 - 11346.8		
prior to, or within 120 days of, the effective date of the regulations listed above.						
Print Only Other (specify) 3. DATE(S) OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §§ 44 and 45)						
4. EFFECTIVE DATE OF REGULATORY CHANGES (Gov. Code § 11346.2) Effective 30th day after Effective on filling with Secretary of State 5. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY						
Department of Finance (Form S	STD. 399)	Fair Political Practi	ices Commission	State Fire Marshal		
Other (Specify)						
6. CONTACT PERSON				TELEPHONE NUMBER		
Frank R. Vitulli, Ch	ief, Office of Re	gulations Develo	pment	(916) 65 7- 2586		
form, that the information action, or a designee of	on specified on this form the head of the agency,	n is true and correct, a	ect copy of the regulatio and that I am the head o make this certification.			
SIGNATURE OF AGENCY HEAD OR DESIGN TYPED NAME AND TITLE OF SIGNAYORY	April 26, 1995					
	ector					

NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

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"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

Amend Sections 40-015.11 and .211 to read:

40-015 IMPLEMENTATION OF REGULATIONS PURSUANT TO SENATE BILL 485, CHAPTER 722, STATUTES OF 1992 AND WELFARE AND INSTITUTIONS CODE SECTION 11201.5. STATUTES OF 1991, CHAPTER 97

40-015

.1	Sections Implemented	(Continued)	
	.11	89-100	Assistance Payments Demonstration Project (APDP) and California Work Pays Demonstration Project (CWPDP)
		89-10 2 <u>1</u>	Federal Demonstration Projects - Introduction
		89+300	Wolk indentives
		89-301 <u>105</u>	Elimination of Time Limitations for 30 and 1/3 Earned Income Disregard and Elimination of the 100-Hour Limit
		89+400	Ald Pdynents
		89- 4 Ø2 <u>110</u>	Maximum Aid Payment (MAP) Level and MAP Restriction
2	Effoative Dates	/Continued)	

Effective Dates . 2

(Continued)

.21 Section

The specified effective date is:

.211 Relocation

Section 89-402110.4 pertaining to the Family Grant Relocation Family Grant (RFG) shall only apply to all applicants as of December 1, 1992. However, in accordance with the Green v. Anderson court order, this provision shall not be implemented until a determination by a court appropriate jurisdiction allows such implementation.

Authority Cited:

Sections 10553, 10554, 11201.5, 11209, and 11450(g), Welfare and Institutions Code.

Reference:

Sections 11201.5, 11450.01, and 11450.03, Welfare and Institutions Code; Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992; and Memorandum of Decision and Order in Green v. Anderson, (Civ. S-92-2118) dated January 28, 1993.

2

Amend Section 40-019.11 to read:

40-019 IMPLEMENTATION OF REGULATIONS PURSUANT TO SENATE BILL 35, CHAPTER 69, STATUTES OF 1993 FOR THE ASSISTANCE PAYMENTS DEMONSTRATION PROJECT

40-019

.1	Gener	al	(Continued)	
	.11	Sections Modified	44-111	Payments Excluded or Exempt from Consideration As Income
			44-115.3	Evaluation of Income In-Kind
			44-207.113(a)	Income Eligibility
			44-207.322	Financial Eligibility
			44-315.3	Amount of Grant
			44-402.1	Computation of a Reduced Income Supplemental Payment
			80-301r.(1)(A)	Definition of "Recipient"
			89-301 <u>105</u> .1	30 and 1/3
			89- 4 02 <u>110</u> .1	MAP Amount
.2	Effec	tive Date	(Continued)	

Authority Cited:

Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 11255 and 11450.015, Welfare and Institutions Code; and Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992.

Amend Sections 40-020.1 and .7 to read:

40-020 IMPLEMENTATION OF CALIFORNIA ALTERNATIVE ASSISTANCE PROGRAM (CAAP)

40-020

The adoption of Chapter 89-700 and the amendment of Sections 40-131.3, 40-181.2, 44-111.3, 44-207.322, and 89-1021, which implement the California Alternative Assistance Program (CAAP) shall be effective May 1, 1994. Counties are required to meet the CAAP informing requirements at application and redetermination of eligibility for applicants and recipients subject to the California Work Pays Demonstration Project (CWPDP) beginning May 1, 1994.

.2 through .6 (Continued)

.7 Section 89-10/1 is amended to require that CAAP be included in the CWPDP provisions of \$\frac{\psi}{\psi} \psi \frac{\psi}{\psi} \frac{

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Section 11280, Welfare and Institutions Code; and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

Amend Sections 40-022.11 and .12 to read:

40-022 IMPLEMENTATION OF REGULATIONS FOR THE INCREASED PROPERTY 40-022 LIMITS AND RESTRICTED ACCOUNTS PURSUANT TO SENATE BILL 35, CHAPTER 69, STATUTES OF 1993 AND SENATE BILL 1078, CHAPTER 1252, STATUTES OF 1993 FOR THE CALIFORNIA WORK PAYS DEMONSTRATION PROJECT

.1	Sections Implemented	(Continued)	
	.11 Sections Adopted	89-\$\$1 <u>115</u>	Increased Property Limits for Recipients
		89-302 <u>120</u>	\$2,000 Property Limit for Recipients
		89-\$Ø\$ <u>125</u>	Increased Motor Vehicle Limit for Recipients
		89-\$Ø <u>#130</u>	Restricted Accounts for Recipients
	.12 Sections Amended	42-207	Property Which May Be Retained by An Applicant or Recipient
		42-213	Property Items to Be Excluded in Evaluating Property Which May Be Retained
		44-352	Overpayment Recoupment
		80-301	Definitions
		89-10 2 <u>1</u>	Federal Demonstration Projects - Introduction
.2	Effective Date	(Continued)	

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: Sections 11155.1 and 11155.2, Welfare and Institutions Code;

45 CFR 233.20(a)(3)(i)(B); and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and

Human Services on March 9, 1994.

Modify Section 41-440 (Handbook) to read:

41-440 FEDERAL AFDC-U: UNEMPLOYED PARENT PROGRAM

41-440

The requirements of Section 41-440 apply to all principal earners who establish deprivation based on unemployment whether the individual is included or excluded from the assistance unit.

HANDBOOK BEGINS HERE

See Section $89-301\underline{105}$.2 on the exemption from the 100-hour limit specified in this section for those recipients subject to the Assistance Payments Demonstration Project specified in Division 89. The county shall continue to apply the 100-hour limit to all AFDC-U applicants.

HANDBOOK ENDS HERE

.1 (Continued)

Authority Cited:

Sections 10553, 10554, 10604, 11209, and 11450(g), Welfare

and Institutions Code.

Reference:

Sections 10553, 10554, 10604, 11201.5, and 11270, Welfare and Institutions Code; and 45 CFR 233.10(a)(1), 233.100(a)(5), and 250.30(b); and Family Support Act of 1988, Public Law (PL) 100-485, October 13, 1988; Family Support Administration Action Transmittal 91-15 (FSA-AT-91-15), dated April 23, 1991; Omnibus Budget Reconciliation Act (OBRA) of 1990,

Section 5061.

Modify Section (Handbook) 42-207.2 to read:

42-207 PROPERTY WHICH MAY BE RETAINED BY AN APPLICANT OR RECIPIENT

42-207

.1 (Continued)

HANDBOOK BEGINS HERE

.2 See Sections 89-\$0/115 and 89-\$0/2120 for the \$2,000 property limit which applies to AFDC FG/U recipients who are subject to the California Work Pays Demonstration Project, as specified in Division 89.

HANDBOOK ENDS HERE

Authority Cited:

Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11155, 11155.1, 11155.2, and 11257, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B); and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

Modify Sections 42-213.123(b)(1)(A), .125(a), and .2z.(1) (Handbook) to read:

42-213 PROPERTY ITEMS TO BE EXCLUDED IN EVALUATING PROPERTY WHICH MAY BE RETAINED

42-213

- .1 Real Property to Be Excluded (Continued)
 - .12 (Continued)
 - .123 (Continued)
 - (a) (Continued)
 - (b) (Continued)
 - (1) (Continued)

HANDBOOK BEGINS HERE

(A) See Section 89-\$\$\mathcal{9}\mathcal{1}\frac{115}{115}\$ for the higher property and motor vehicle limits for those recipients subject to the California Work Pays Demonstration Project as specified in Division 89.

HANDBOOK ENDS HERE

- .124 (Continued)
- .125 (Continued)

HANDBOOK BEGINS HERE

(a) See Sections 89-\$\mathbb{g}1\frac{115}{215} and 89-\$\mathbb{g}2\frac{120}{220} for the higher property and motor vehicle limits for those recipients subject to the California Work Pays Demonstration Project, as specified in Division 89.

HANDBOOK ENDS HERE

.126 (Continued)

- .2 Personal Property to Be Excluded (Continued)
 - a. through y. (Continued)
 - z. (Continued)

HANDBOOK BEGINS HERE

(1) See Sections 89-\$\$\mathref{115}\$, 89-\$\$\mathref{2120}\$ and 89-\$\$\mathref{3125}\$ for the higher property and motor vehicle limits for those recipients subject to the California Work Pays Demonstration Project, as specified in Division 89.

HANDBOOK ENDS HERE

- aa. (Continued)
- .3 through .5 (Continued)

Authority Cited:

Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11155, 11155.1, 11155.2, 11155.5, and 11257, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B) and (a)(4)(ii); Sidwell v. McMahon, United States District Court (E.D. Cal.) May 7, 1990, civil no. S-89-0445; and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

Amend Section 44-115.311(b) to read:

44-115 EVALUATION OF INCOME IN-KIND (Continued)

44-115

.3 In-Kind Income Values

.31 (Continued)

.311 (Continued)

(b) Below are the In-Kind Tables for recipients designated as APDP control group participants in the counties of Alameda, Los Angeles, San Bernardino, and San Joaquin (see Section 89-10/21.2). (Continued)

.32 (Continued)

Authority Cited:

Sections 10553, 10554, 11450, and 11453, Welfare and Institutions code.

Reference:

Sections 11450, 11450.015, 11452 and 11453, Welfare and Institutions Code; and Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992.

Modify Sections 44-207.113(b) and .322 (Handbook) to read:

44-207 INCOME ELIGIBILITY

44-207

- .1 General (Continued)
 - .11 Minimum Basic Standard of Adequate Care (MBSAC) (Continued)
 - .113 (Continued)

HANDBOOK BEGINS HERE

- (a) (Continued)
- (b) Below are the 185% of MBSAC amounts for recipients designated as APDP control group participants in the counties of Alameda, Los Angeles, San Bernardino, and San Joaquin (see Section 89-1021.2). (Continued)

HANDBOOK ENDS HERE

- .12 (Continued)
- .3 Financial Eligibility (Continued)
 - .32 (Continued)
 - .322 (Continued)

HANDBOOK BEGINS HERE

*See Section 89-301105.1 for elimination of the 4-month time limit for the \$30 and 1/3 earned income disregards and elimination of the additional 8-month limit for the \$30 earned income disregard. This will apply to those recipients who are subject to the Assistance Payments Demonstration Project as specified in Division 89. (Continued)

HANDBOOK ENDS HERE

.33 (Continued)

Authority Cited:

Sections 10553, 10554, 11450, and 11453, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11017, 11255, and 11280, Welfare and Institutions Code; 45 CFR 233.20(a)(2)(xiii) and (3)(vi)(B) and (xiv); and Darces v. Woods, 35 Cal. 3d 871; Rutan v. McMahon, Case No. 612542-L (Alameda Superior Court) February 19, 1988; Letter from Department of Health and Human Services (DHSS), December 5, 1990; Johnson v. Carlson Stipulated Judgement; Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992; and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

Modify Section 44-315.311(b) (Handbook) to read:

44-315 AMOUNT OF AID (Continued)

44-315

- .3 Amount of Grant (Continued)
 - .31 MBSAC (Continued)
 - .311 MBSAC and MAP Levels (Continued)

HANDBOOK BEGINS HERE

- (a) (Continued)
- (b) NOTE: Below are the MBSAC and MAP amounts for recipients designated as APDP control group participants in the counties of Alameda, Los Angeles, San Bernardino, and San Joaquin (see Section 89-1021.2). (Continued)

HANDBOOK ENDS HERE

Authority Cited: Sections 10553, 10554, 11209, 11450, 11450(g), and 11453, Welfare and Institutions Code.

Reference:

Sections 11017, 11450, 11450.01, 11450.015, 11450.03, 11452, and 11453, Welfare and Institutions Code; and Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992.

Modify Section 44-352.115(a) (Handbook) to read:

44-352 OVERPAYMENT RECOUPMENT (Continued)

44-352

- .1 Calculation of the Overpayment (Continued)
 - .11 (Continued)
 - .115 (Continued)

HANDBOOK BEGINS HERE

- (a) See Section 89-\$\mathref{9}1\frac{115}{2115} for the higher property and motor vehicle limits for those recipients subject to the California Work Pays Demonstration Project, as specified in Division 89.
- (b) (Continued)

HANDBOOK ENDS HERE

Authority Cited:

Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11017, 11155, 11155.1, 11155.2, 11257, 11450, 11452, and 11453, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B) and (a)(3)I(a)(13)(i)(A)(2); and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

Modify Section 44-402.12 (Handbook) to read:

44-402 COMPUTATION OF A REDUCED INCOME SUPPLEMENTAL PAYMENT

44-402

.1 (Continued)

HANDBOOK BEGINS HERE

- .11 (Continued)
- .12 Below are the 80% of MAP amounts for recipients designated as APDP control group participants in the counties of Alameda, Los Angeles, San Bernardino, and San Joaquin (see Section 89-1021.2). (Continued)

HANDBOOK ENDS HERE

Authority Cited:

Sections 10553, 10554, 11450, and 11453, Welfare and

Institutions Code.

Reference:

Sections 11017, 11255, 11450, 11450.015, and 11450.2, Welfare and Institutions Code; 45 CFR 237.27; and Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992.

Adopt Division 89 title and renumber Section 89-102 to Section 89-101 to read:

DIVISION 89 DEMONSTRATION PROJECTS

CHAPTER 89-100 ASSISTANCE PAYMENTS DEMONSTRATION PROJECT (APDP)
AND CALIFORNIA WORK PAYS DEMONSTRATION PROJECT (CWPDP)

89-1071 FEDERAL DEMONSTRATION PROJECTS - INTRODUCTION (Continued)

89-1021

Authority Cited:

Sections 10553, 10554, 11201.5, 11209, and 11450(g), Welfare

and Institutions Code.

Reference:

Sections 11155.1, 11155.2, 11201.5, 11280, 11450.01, and 11450.03, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B); Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992; and Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and

Human Services on March 9, 1994.

Repeal Chapter 89-300 title and renumber Section 89-301 to Section 89-105 to read:

Chapter 89+300 work incentives

89-301105 ELIMINATION OF TIME LIMITATIONS FOR 30 AND 1/3 EARNED INCOME DISREGARD AND ELIMINATION OF THE 100-HOUR LIMIT (Continued)

89-301105

Authority Cited:

Sections 10553, 10554, 11201.5, 11209, and 11450(g), Welfare

and Institutions Code.

Reference:

Sections 11201.5, 11255, and 11450.015, Welfare and Institutions Code; and Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human

Services on October 30, 1992.

Repeal Chapter 89-400 title; renumber Section 89-402 to Section 89-110; and amend Section 89-110.412 to read:

CHAPTER 89/400 AID PAYMENTS

89-402110 MAXIMUM AID PAYMENT (MAP) LEVAL AND MAP RESTRICTION (Continued)

89-**4**02<u>110</u>

Relocation Family Grant (Continued) . 4

.41 (Continued)

.412 Other State MAP

The MAP amount of the previous state or U.S. Territory of residence, plus California special needs when included in Section 89-402110.411. (Continued)

Authority Cited:

Sections 10553, 10554, 11209, and 11450(g), Welfare and

Institutions Code.

Reference:

Sections 11450.01, 11450.015, and 11450.03, Welfare and Institutions Code; and Federal Terms and Conditions for the California Assistance Payments Demonstration Project as approved by the United States Department of Health and Human Services on October 30, 1992; and Memorandum of Decision and Order in Green v. Anderson, (Civ. S-92-2118) dated January 8,

1993.

Repeal Chapter 89-500 title; renumber Section 89-501 to Section 89-115; and amend Sections 89-115.11, .12, .13, and .2 to read:

chapter 89/500 property linits for recipients under the california work pays penonstration project

89-\$\$1115 INCREASED PROPERTY LIMITS FOR RECIPIENTS

89-\$Ø**1**115

.1	General	(Continued)
	OCIICIAI	(COTTCTTTUCA)

- .11 \$2,000 Property Limit \$2,000 for property as specified in Section 89-
- .12 \$4,500 Motor Vehicle \$4,500 for one motor vehicle as specified in Section 89-\$03125, and
- .13 \$5,000 Restricted \$5,000 for restricted accounts as specified in Account Section 89-304130.
- .2 Excess Property Discovered When an application has been approved and the county subsequently discovers that the AU's property exceeded the \$1,000 property limit on the date of approval, the county shall not apply any of the increased property limits specified in Section 89-\$0115.1 until the first day of the month following the date the AU's property is at or below the \$1,000 property limit for

applicants. (Continued)

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: Sections 10553, 10554, 11155, 11155.1, 11155.2, and 11257, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B); and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

Renumber Section 89-502 to Section 89-120 and amend Section 89-120.1 to read:

89-\$\darkop2120 \\$2,000 PROPERTY LIMIT FOR RECIPIENTS

89-\$**\$2**120

.1 General

When an AU includes a recipient, the county shall apply a \$2,000 limit to the net market value of the AU's countable property without regard to the \$5,000 restricted account specified in Section 89-\$04130. (Continued)

Authority Cited:

Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11155, 11155.1, and 11257, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B); and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

Renumber Section 89-503 to Section 89-125 and amend Section 89-125.11 to read:

89-\$∅\$125 INCREASED MOTOR VEHICLE LIMIT FOR RECIPIENTS

89-\$03125

.1 General

(Continued)

.11 Vehicle Over \$4,500

When the vehicle's net market value exceeds the \$4,500 limit, the excess value shall be included in the \$2,000 property limit specified in Section 89-\$02120. See Section 42-215.4 for determining the value of a motor vehicle. (Continued)

Authority Cited:

Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11155, 11155.1, and 11257, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B); and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

89-\$04130 RESTRICTED ACCOUNTS FOR RECIPIENTS

89-\$Ø**#**130

(a) General

(Continued)

(1) Additional Funds

The funds shall be in addition to the \$2,000 property limit specified in Section 89-502120.

(b) Written Agreement

Before an account can be designated as "restricted," the caretaker relative shall sign an agreement with the county welfare department which sets forth the requirements, restrictions and penalties specified in Section 89-\$04130. (Continued)

(f) Interest Exemption

(Continued)

- (2) (Continued)
 - (A)

Failure to deposit the interest within 30 calendar days shall result in a determination that a nonqualifying withdrawal has occurred, unless good cause exists for exceeding the 30-day limit as specified in Section 89-504130(j).

(g) Qualifying Withdrawal

(Continued)

- (4) (Continued)
 - (1)

Failure to timely redeposit the funds shall result in a determination that a nonqualifying withdrawal has occurred, unless good cause exists as specified in Section 89-\$\$\mathbb{A}\$\frac{130}{130}\$(j). (Continued)

(i) Nonqualifying Withdrawal

Except as specified in Section 89-504130 (p)(1), the county shall determine that a nonqualifying withdrawal has occurred when:

(1) Noncooperation

the AU fails to expend funds or to provide verification of a withdrawal or expenditure within the required time limit unless good cause, as specified in Section 89-504130(j), exists for exceeding the time limit; (Continued)

(i) Good Cause

The county shall determine that good cause exists for exceeding the time limits specified at Sections $89-504\underline{130}(f)(2)$, (g), and (h) when any of the following situations exist. (Continued)

(n) Shortening the Period of Ineligibility (Continued)

- (2) (Continued)
 - (B)

Identify the original MBSAC plus any special needs allocated to the ineligible family unit and multiply it by the number of ineligible months prior to the increase. Subtract the total from the amount in Section 89-\$04130(n)(2)(A).

(C)

Divide the result calculated in Section 89- 504130(n)(2)(B) by the increased standard of need. Round down the result to the nearest whole number.

(D)

The revised period of ineligibility is the final result in Section $89-504\underline{130}(n)(2)(C)$ plus the number of ineligible months prior to the increase. (Continued)

(q) Termination of the Written Agreement

(Continued)

(3)

the AU does not provide timely verification of the account information as specified in Section 89-304130 (c); or (Continued)

Authority Cited:

Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11155, and 11155.2, Welfare and Institutions Code; 45 CFR 233.20(a)(3)(i)(B); and the Federal Terms and Conditions for the California Work Pays Demonstration Project as approved by the United States Department of Health and Human Services on March 9, 1994.

STATE OF TALEOUTH - CHEICE OF DATE NOTICE Y BELLOATIO	NATE OF A TONS		(See instructions on reverse)	For use by Secretary of State only	
AGENCY		A I I V boss	AGENCY FILE NUMBER (If any)		
California Departmen			1194-33		
OAL FILE NOTICE FILE NUMBER NUMBERS	BEGULATORY ACTION NUMBER	EMERGENCY NUMBER	PREVIOUS REGULATORY ACTION NUMBER	FILED	
	For use by Office of Administr	ative Law (OAL) only		In the office of the Secretary of State of the State of California	
		ADMINISTRA	PROVED FOR FILE AND PUBLICATION JUN 9 1995 e of Administrative Law	JUN 9 1995 At 3:17 O'clock Att. Bill JONES, Secretary of State. By Collecto Connec	
NOTICE		REGU	JLATIONS	Detail (Control of Control of Con	
A. PUBLICATION OF NOT	TICE (Complete for put	olication in Notice Re	aister)		
. TOPIC OF NOTICE	(complete lei par	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE	
Repeal of Obsolete S	Sections	4. AGENCY CONTACT PERS	201	TELEPHONE NUMBER	
Notice type Notice re Proposed Regulatory Action OAL USE ACTION ON PROPOSED	Other	4. AGENCY CONTACT FERS	NOTICE REGISTER NUMBER	PUBLICATION DATE	
ONLY Approved as Submitted	Approved as Modified	Disapproved/ Withdrawn			
SECTIONS	AMEND				
AFFECTED	REPEAL				
	50-015, 50-016,	50-017, 50-019,	and 50-020		
Regular Rulemaking (Gov. Code, § 11346)	Resubmittal	Changes Without (Cal. Code Regs.,	Regulatory Effect title 1, § 100)	Emergency (Gov. Code, § 11346.1(b))	
Certificate of Compliance: The prior to, or within 120 days of,			mplied with the provisions of C	Government Code §§ 11346.4 - 11346.	
Print Only	Other (specify)	ADDED TO THE BUILDING E			
DATE(S) OF AVAILABILITY OF MODIFIED	HEGULATIONS AND/OH MATERIAL	ADDED TO THE RULEMAKING F	ILE (Cal. Code Hegs. title I, §§ 44 and	145)	
EFFECTIVE DATE OF REGULATORY CH Effective 30th day after filing with Secretary of State CHECK IF THESE REGULATIONS REQUI	Effective on filing with Secretary of State	Effective other (Specify)	URRENCE BY ANOTHER AGENCY O	B ENTITY	
Department of Finance (Form		Fair Political Pract		State Fire Marshal	
Other (Specify) 3. CONTACT PERSON				TELEPHONE NUMBER	
Frank R. Vitulli, Ch	nief, Office of Re	gulations Develo	pment	(916) 657-2586	
form, that the informati	ed copy of the regulation on specified on this forn f the head of the agency,	n is true and correct,	and that I am the head o	f the agency taking this	
SIGNATURE OF AGENCY HEAD OR DESIG	NEE /			DATE April 26, 1995	
YPED NAME AND TITLE OF SIGNATORY	1,007			,	
Eloise Anderson, Din	rector				

NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

RESUBMITTAL OF DISAPPROVED OR WITHDRAWN REGULATIONS

When resubmitting previously disapproved or withdrawn regulations to OAL for review, use a new STD. 400 and fill out Part B, including the signed certification. Enter the number of the previously disapproved or withdrawn filing in the box marked

"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

50+013 GRIMESEY V/ MCMAHON RETROACTIVE COURT CASE

\$Ø+Ø1\$

handbook begins here

11 Background

The <u>Grinesey</u> of <u>Newanon</u> lawsuit challenged the state department of social services (neteinalter teletted to as Isdssy)/ authority to deem the income of seriot datents to 18+year+old minor parents living at home and not attending schooll on June 24/ 1988 the united states district court for the northern district of California issued an injunction prohibiting spss from further implementation of MPP 44+133/7 (senior parent deeming) and from recovering overtoayments due to failure to consider senior parent income/for members of the class. The court also ordered spss to confer with plantiffs attorneys for the purpose of developing procedures to provide retroactive benefits to class members! On december 22/ 1988 the order for retroactive benefits was issued and the provisions of that order are set forth in the following reduciations!

handbook ends here

12 petinitions

Fot the putposes of these tegulations!

- the income of the senior parent!
- (b) /seniot patent/ means the natural or adoptive patent/ or legal guardian
- ICI TELLOGITATE DESCRIPTE DESCRIPTE DE COMPIETES!
 VOLICE MNICH WHAT DESCRIPTES!
- (4) Ishdaleneutal claim total abevelits?

 Applemental claim total abevelits?
- Ley lettoactive petiodl means the detiod of time between january 18, 1988 and june 23, 1988.

If the following forms are available pursuant to these regulations, and are identified by form number as follows:

Informing/Claiming Notice and Claim Form (state mailed) Temp 1694

Informing/Claiming notice and claim form (county mailed) temp 1894a

Supplemental claim form temp 1894b

/3 Informing potentially eligible persons of the Availability of Retroactive benefits

handbook begins here

- /31 In order to notify potentially eligible persons spss shall?
 - /311 On of before april 1/ 1987/ send by first class mail an informing/claiming notice printed in both English and Spanish to all persons who were 18 years of age and who received appc/linked Medi/cal benefits between January 1/ 1985 and August 31/ 1986/
 - /312 Issue posters orinted in both english and spanish informing the general public of the availability of benefits. The posters shall contain the same language as the informing/claiming notice!
 - These posters shall be provided to the Engloyment development for additional posters will be made available for land these posters shall be provided to the Engloyment development.
 - /313 Provide CWDs with reproducible copies of the English and Spanish informing/claiming notice/

handbook ends here

132 COUNTY RESPONSIBILITIES

- /321 The counties identified in subsection /322 below shall eithet identify all applications for application wete denied due to section 44+133/7/ of identify all applications which wete denied due to excess income between january 18/ 1988 and june 23/ 1986/ and shall mail an informing/claiming notice on or before april 1/ 1987 to all such applicants/
- /322 The counties tesponsible for identifying applicants and mailing the specified informing/claiming notice as set forth in subsection /321 above ate! Alameda/ Amadot/ Calavetas/ Contta Costa/ Ttesno/ Ketn/ Lassen/ Los Angeles/ Marin/ Mendocino/ Montetey/ Mapa/ Otange/ Placet/ Plumas/ Rivetside/ Sactamento/ San Betnatdino/ San Diego/ San Francisco/ San Joaquin/ San Luis Obispo/ San Mateo/ Santa Clata/ Santa Ctut/ Solano/ Sonoma/ Stanislaus/ Suttet/ Ventuta/ and Yolo/

- /323 AII ¢ónntiés sháII þóst fnglish and sþánish infótning þóstéts/ súpþliéd þý sþss/ in ¢ónsþicuóus lócatións in áII cwd ófficés ftón Aptil 1/ 1987 thtóugh Juné 30/ 1987/
- /324 AII counties shall forward a supply of the English and Spanish informing posters! supplied by SDSS! to all Food Stamp issuance outlets within the county with instructions that the posters be displayed in conspicuous locations from April 1/ 1987 through june 30/ 1987!
- /323 AII counties shall teptoduce a supply of the English and Spanish informing/claiming notice specified in Subsection /313 and shall give of mail such notices to anyone upon teguest/
- /326 AII counties shall designate a person who will be responsible for receiving and processing changes of address for claimants if payment of retroactive benefits is stayed pending appeal of the lawsuit/

14 Application for Retroactive Benefits

141 Claimant Responsibilities

- /411 the claimant shall complete and sign/ undet penalty of perjuty/
 the claim form/
 - (a) A claim form shall be considered complete when the claimant has provided a response to all the guestions and has provided a name/ address/ date of birth and social security number (ssn) or indication that claimant has no ssn/
- 1412 the claimant shall submit a claim form to the cwd in each county during the month(s) for which tettoactive denied/discontinued claimed(
- /413 The claim form must be submitted by June 30/ 1987/ except as provided in subsection /414/
 - loth is submitted shall be detethined as tollows!
 - 1/ The postnatk date of the envelope when the claim is
 - 2/ The date stanged on the claim form by the CWD/ when the
 - Ine date the claim form was signed by the claimant, when above.

/414 The claimant shall be permitted to tesubmit a previously denied in accordance with subsection (522 and the date of tesubmittal is on of before July 30/ 1987 of 30 days from the date of the denial for submission to the wrong cwp/ whichever is later/

142 CWD RESDONSIBILITIES

- /421 The CWP shall stamp each claim form with the date the form was teceived and shall retain all envelopes that were postmarked after June 30/ 1987/
- /472 Claims submitted after the date specified in subsection /411 above shall be denied except as provided in subsection /414 above/
- /423 The CND shall attempt to locate a case tecotal including a meditcal case tecotal for the claimantl

15 Claim/sy Processing

- /BI The CWD shall texten each claim totm to detetmine whether the claimant may be a member of the class and whether claimant has provided a complete claim form durshant to subsection (4111)
 - /BII II the claimant answered yndy to any of the first five guestions on the claim form, the claimant is not a member of the class and the county shall deny the claim without further review.
 - /312 The CWD shall tetiew the claim form and teguest further information of clarification if the form is incomplete of the information is internally inconsistent!
 - 1913 In the exent the case tecotd cannot be located of the information (8 below)
 - /314 If the supplemental claim form is not tetutned to the cvaim shall be denied/
 - lay the date the supplemental claim form is returned to the cwp is determined in accordance with subsection (411/a) above(

- /313 Claimants may be teduested to supply documentation of information benefits!
- \data \text{\data \text{\data} \quad \quad \text{\data} \quad \text{\data} \quad \quad \text{\data} \quad \quad \text{\data} \quad \quad
- /317 If the CWD determines that the claimant is not a member of the class, the CWD shall deny the claim. The CWD shall review all existing records and shall deny the claim, the CWD shall review all existing records and shall deny the claim if no record can be found that the claimant applied for or received cash aid. This provision applies only when the CWD can certify that a listing of cash aid cases (such as the AFDC payroll or warrant register) was retained in addition to cash aid case records for the month(s) claimed. In addition, this provision can be applied to claimants who were denied cash aid only when the CWD can certify that existing cash aid case records include all denials.
- 182 If a CWD teceives a claim for any period in which the CWD can determine to the wrong county! the CWD shall either!
 - 1921 Fotward within 13 working days from the date of receipt the claim has been forwarded to the correct can form at a copy of the charm of the correct can form of the charm that for the claim month to be drocessed by the second can when the correct can can be determined by the information on the claim form of case record in addition, the can the information on the claim form of case record the determined by the information on the claim form of case record in addition, the cap the claim form the correct can can be determed the claim form the correct can be determed to the correct ca
 - lay the date the claim form was submitted to the fifst cup/ as determined in subsection (413/a)/ shall be considered the date of submission to the second cwp/

40x4

1923 Deny that detiod claimed in which the cottect can cannot be

IB Calculation of Retroactive Benefits

When the case tecota contains sufficient information of when textoactive benefits as totiows!

- /BI IN the event that the intothation on the claim toth conflicts with the the intothation contained in the case tecotal the CND shall have the intothation contained in the case tecotal the CND shall have the intothation contained in the case tecotal the CND shall have the intothation on the claim form conflicts with the
- /82 Fox fach month of the tettoactive petiod/ detetmine the months in which been considered (see Subsection /318)/
- /B3 Fot each month detethined in subsection /B2 above/ calculate the cottect grant in accordance with chaptet 44/100 /Income/ and section 44/313/4 /Amount of Aid/ except/
 - lal seniot patent income shall not be deemed to the minot patent!
 - (b) The value of need items contributed by the senior parent to the minor parent shall not be considered as income in-Kind!
 - the variate of the expenditnies!

 Instinctious to nee the cash to wake a paichase for the evitie that the time attent technol patent and child then the extite family. Including the senior patent and child then the extite family. Including the senior patent and child teny tend entite family. Including the senior patent and child teny tend extent with institute of the expenditnies.
 - thateloter shall not be considered income to the winor batent of child/teny and the cash has dinen for a testricted durpose, the cash has to be need for the winor datent of datent cash husen for a sestricted durpose, the datent cash husen such defent of the minor datent of the minor datent and the senior datent, daye the minor
 - Yel cary anich are activited as to are is coarideted income to the winot cary anich are actent if exceeds soo det calendat darteet from the care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and tegniative diapeted income to the winot darent care and the darent ca
- /ba detethine the amount of cash aid actually teceived by the claimant and compate it to the cottect grant for each month identified in subsection [b2 above]
 - lay it the cash aid teceived is less than the cottect grant/ the diffetence is the tettoactive benefit for that month/ to be paid in accotdance with subsection /7 below/
 - (b) If the cash aid teceived is mote than the cottect grant/ an dvetpayment exists and shall be balanced against tettoactive benefits ptiot to payment undet subsection (7 below)

- (c) If the cash aid teceived is the same as the cottect grant, and an overpayment was previously calculated for that month due to the deeming of senior parent income, the overpayment shall be voided, all recouped shall be considered a retroactive benefit to be paid and the cash aid teceived is the same as the cottect grant, and an thouse breviously the considered a retroactive benefit to be paid under subsection (7 below)
- (d) If the cash aid teceived is the same as the correct grant and no overpayment was previously calculated for that month, claimant is not a class member and the claim shall be denied.
- /BB Notify claimants of the disposition of their claims within 90 days of the close of the claim veriod/
- 17 Computation of the Total Retrodetive Payment
 - 171 The CWD shall use the petcentage specified in subsection 1711 to compute the amount of intetest on the payable tettoactive benefits for each month!
 - (a) multiply the amount of the monthly tettoactive venefit by the apptoptiate vertentage for the month in which payment is authorized/ as set forth in subsection (711 velow)

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Example!

(Month of tettoactive febtuaty 1988 + \$474/00 benefity

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Add the angult of the monthly tettoactive benefit to the intetest

nandbook begins here

Example:

Retioactive benefit f interest \neq Retioactive payment 8474 \neq 8114/28 \neq 8888/28

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(¢) Detetnine the total anount of the tettoactive payment by adding

1711 TABLE FOR COMPUTING INTEREST FOR MONTHLY RETROACTIVE BENEFITS

nandbook ends heke

/B Statistical Reporting

- /81 The CWD shall submit to SDSS a statistical tepott ho latet than november 13/ 1987/ of 80 days from the date counties are instructed to make payment, whichever is later/ The report shall contain the following information!
 - lay the humber of claims baid!
 - ABY The humber of supplemental claim forms sent out!
 - led the humber of claims received?
 - ldy the total amount of money paid to reimburse class members!
 - les the number of claims paid based solely on information in the case
 - lty the number of claims paid based on information provided by supplemental claim forms!

BOFOIG VAESSEN V/ WOODS RETROACTIVE COURT CASE

\$Ø+Ø18

handbook begins here

11 Background

The <u>Vaessen</u> of <u>Noods</u> lanswit challenged the authotity of the state pepatthent of social services (spss), to count income tax refunds as income available to meet curtent needs rather than as resources! On april 3/ 1984/ the California supreme Court ordered spss and county wellare departments (CWPs) to treat income tax refunds as resources rather than earned income in grant determination. The final judgment ordered spss to provide retroactive benefits and interest to class members! On september 17/ 1987 the final order was signed and the provisions of that order are set forth in the following redulations!

handbook ends here

12 Definitions

121 For the purpose of these regulations!

- /211 YCIAIM FOYNY MEANA THAT POYTION OF THE SPSS DESIGNED INFOYMING/CIAIMING NOTICES (TEMP 1706 AND TEMP 1706AY WHICH MUST DE COMPLETED, SIGNED/ AND TEXTOR TO THE APPYOPTIATE CWD FOY DETECTION OF A CIAIMANTYS ELIGIBILITY FOY TEXTOACTIVE DENETITES!
- 1212 iciass wenders, are individuals othernise cash aid eligible and id tednoced, devied or terminated dating the termost had their cash aid
- totavely the extern of the timest completion and tetath of a cannet ances mhich oterate the timest completion and tetath of totavel at antertion and tetath of totavely antertion and tetath of totavely and tetath of totavely antertion and tetath of totavely and tetath of the timesty and totavely and tetath of the timesty and totavely and tetath of the timesty and tetath of the timesty and totavely and the timesty and the timesty and the timesty and totavely and the timesty a
- 1214 YRELEASE OF TAX INFOYMATION FOYMY MEANS THE SPSS DESIGNED FOYMS ATEMP 1706P AND TEMP 1706PY/ SIGNED BY THE CLAIMANT TO GIVE PEYMISSION FOY THE CWP TO SECUTE CLAIM VEYIFICATION INFOYMATION FYOM THE INTEYNAL REVENUE SETVICE (IRSY/ AND/OF THE FYANCHISE TAX BOATD (FTBY/
- /213 /Rettoactive retiody means the petiod of time vetween January 1/ 1979 through match 31, 1980 and/or may 1, 1982 through August 31, 1982.

- /218 /30/00/16/06/14/06 Claim form/ /Temo 17068/ means the spas designed claiming document which is to be filled out by the claimant/ and used when the claimant/s case record is not available of the information contained in the claimant/s case record is not sufficient to betwit the determination of eligibility for tether is retroactive benefits/
- /3 Informing potentially eligible persons of the Availability of Retrodetive Benefits

- /31 In order to notify potentially eligible persons, spss shall,
 - /311 On of belote Match 1/ 1988/ send by fitst class mail an Informing/claiming wotice /temp 1708// ptinted in both english and spanish/ to all appc tecipients who teceived an income tax teluma in the petiods January 1979 through Match 1980 and/or May 1982 through August 1982/
 - /312 Issue posters (Temp 1706E) printed in both English and spanish informing the general public of the availability of benefits/
 - /313 Ptovide CWPs with teptoducible copies in English and Spanish of the Informing/Claiming Wotice (Temp 170bay) the Supplemental Claim Form (Temp 170bb)/ and the FTB and IRS Release of Tax Information Forms (Temp 170bC and Temp 170bP)/

handbook ends here

- 132 County Responsibilities
 - /371 AII ¢óuntiés shall þóst English and Spanish informing þóstéts súppliéd þý SpSS in ¢ónsþi¢uóus ló¢atións in all ¢wp óffi¢és fróm nar¢h 1/ 1988 thróugh nay 31/ 1988/
 - /322 All counties shall teptoduce a supply of the Informing/Claiming
 Notice (Temp 1708A)/ and shall give of mail such notices to anyone
 upon teguest/
 - 1323 If mote than one CWD is listed on the Claim form (Temp 1706) of on the Release of Tax Information form (Temp 1706C)/ the CWD shall photocopy and forward within 18 working days all claiming documents to each CWD listed/
- 14 Application for retroactive benefits
 - 141 Claimant Responsibilities!
 - /411 The claimant shall complete and sign under the penalty of perjury the informing/claiming notice (temp 1708 or temp 1708A)/

- (a) The Informing/Claiming Notice shall be considered complete when the claimant has provided a response to all the advestions, and has provided a name, address, and social security number (35N) or indication that claimant has no 35N.
- /412 If sufficient claim verification information is not available in the case file, the claimant shall complete and sign under the penalty of perjuty the supplemental claim form ltemp 1708by and the Release of Tax Information forms for ftb and/or IRS (Temp 1708c and Temp 1708b)/
 - the unuret of deodie in the assistance nuit/
 the ciainant has diopided a tesponse to the income tax
 the ciainant has diopided a tesponse to the income tax
 the subdienental ciain form shall be considered complete when
- /413 The claimant shall submit a claim form (temp 1708 of temp 1708a)
 to the CWD in the county from which after cash aid was received of
 was denied/discontinued during the time period(s) for which
 retroactive benefits are being claimed/
- /414 The claim form ltemp 1700 of temp 1700AY shall be submitted by May 31/ 1988/
 - (a) unless the evidence indicates otherwise, the date the claim form is submitted shall be determined as follows!
 - (1) The postmatk date of the envelope when the claim is
 - 12) The date standed on the claim form by the cwd when the
 - 131 the date the claim form was signed by the claimant! When the date cammot be determined by either sections 30+018/414/41/11/04 /21/

/42 CWP Responsibilities

- 1421 The CVD shall stand each claim form (temp 1706 of temp 1706A) with the date the form was teceived and shall tetain all envelopes that were postmarked after May 31/ 1988/
- /422 Claims submitted after the date specified in section 30/016/414 shall be denied!
- 1423 The CWD shall attempt to locate a case record for the claimant!

/424 The CWD shall personally verily all signatures on the release of tax information forms (remp 1706C and/or temp 1706D)/ by comparing the signature on the form/sy to a signature on a valid driverys licensel identification card from the Department of Motor Vehicles! or a signed social security card! except as provided in section 30+016/313/41/

18 Claim(s) Processing

- /BI The CWD shall feyiew each claim fofm (Temp 1708 of Temp 1708A) to determine whether claimant may be a member of the class and whether claimant has drovided a complete claim form durswant to section 50/018/411/a//
 - /BII If the claimant answeted no to any of the guestions on the informing/claiming notice (remo 1700a)/ the claimant is not a nember of the class and the CND shall deny the claim without further review!
 - /312 The CND shall texten the claim form (temp 1708 and temp 1708a) and templated intormation of claifiteation if the form is incomplete of the intormation is internally incompletent. If the templated intormation is not tethernally incompletent. If the the the date mailed to the claimant, the claim shall be denied.
 - /313 In the event the case tecotd cannot be located of the intothation contained in the case tecotd is insufficient to confith of deny class membership as defined in section 30+018/212/ the CWD shall mail release of tax infothation foths (temp 1708C and/of temp 1708DY) and a supplemental claim foth (temp 1708BY) to the claimant/
 - (4) When a release of tax information form/s) (temp 1700c and/or temp 1700p) is required, the claimant shall provide to the county for signature verification a valid driverys license, identification card from the department of wotor vehicles, or a social security card which has been signed by that claimant. In the event that a verifiable signature cannot be presented in person, then a readable photocopy of the alorementioned identification may be submitted along with the release of tax information forms for teview by the appropriate cwo!
 - IBIA II the release of tax information form(s) (temp 1700c and/of temp 1700p)/ and the signature verification/ and/of the supplemental claim form (temp 1700p) are not completed and returned to the CWD within 30 days of the date mailed to the claimant without good cause/ the claim shall be denied/
 - Lay if one of mote of the foths hentioned in section 80+018/314
 is teththed without the othet teghited foths/ the CND shall
 send a notice of action (noay to the claimant informing
 nim/net that he/she must tethth all the missing foths within
 18 days of be denied!

- (b) it the claimant fails to tethth one of mote of the foths exists!
- If the date the release of tax information form (temp 1706C and temp 1706C and
- /313 Claimants may be tequested to supply documentation whete such documentation is actually in the claimant/s possession/ whete claimants do not have documentation in their possession/ they may be asked to sign a release of information on their behalf/ a claim will not be denied if the claimant fails to provide documentation in his/her possession or sign the release of information form.
- ISIB Whete the case file contains insufficient information to verify a claim, the release of tax information forms (temp 170bp) shall be mailed to the IRS and/or the FTB to obtain claim verification information/
- /317 If the CWD determines that the claimant is not a member of the class, the cwd shall send an woa and deny the claim, the cwd shall review all existing records and shall deny the claim if no record can be found that the claimant applied for or received cash aid. This provision applies only when the cwd can certify that a listing of cash aid cases (such as the appl payroll or warrant registery was retained in addition to cash aid case records for the time period claimed. In addition, this provision can be applied to claimants who were denied cash aid only when the cwd can certify that existing cash aid case records include all denials.
- 182 If a CWD teceives a claim for any petiod in which the CWD can detethine that the form has been submitted to the wrong county! the CWD shall!
 - In addition, the cottect can for alocassing, wis het claim has been tolaying all hot alocassing, and the cottect can form the of techning days flow the date of techning has been folded to the cottect can be defining to the dates of the second can, when the cottect can be defining to the dates of the second can, when the cottect can be defining to the cates and the citim form of case techning to the dates of the citim has been folded at a the cottect can folded to the cottect can folded by the dates of techning has been folded to the cottect can folded the the citim has been folded to the cottect can folded the the citim has been folded to the cottect can folded the th
 - lay the date the claim form is submitted to the fitst cwp/ as determined in section 50/016/414/ shall be considered the date of submission to the second cwp/

- /322 Whete the cottect cwp cannot be detethined iton the iniothation in the case file of wattant tegistets! the cwp identified by FTB on the claim loth ltemp 17001 of the Release of tax iniothation foth ltemp 1700CV shall be considered the cottect cwp!
- IB Calculation of retroactive benefits
 - IBI THE CWD SHAII DELETHINE the AMOUNT OF TELTOACTIVE BENEfits as follows!
 - /BII When the case tecota and/ot wattant tegistets contain sufficient information to verify a claim, the amount of the tectoactive bendefits will be the difference between the old grant amount and the new grant amount when adjusted by counting income tax tefunds as property tather than as income!
 - INTUITION THE INCOME LAX LETING IGENTILES OF IRE ANGLOT LLB (

 1813 ANEX OF THE THEORY THE TERMONAL TO BE THE THEORY TO BE THE THEORY TO BE THE THE THEORY TO BE THE THEORY OF THE THEORY TO BE THE THEORY OF THE THEORY TO BE THE THEORY OF THE T
 - /62 A CWP shall determine the amount of cash aid which was actually received and compare it to the corrected grant or the MAP as instructed in section 30+016/6/
 - 1821 If the cash aid teceived was less than the map fot any month in the tettoactive period due to the teceive of an income tax telund. The difference between the cash aid amount teceived and map of the corrected was less than the map for any month teceived.
- 17 Computation and Delivery of Retroactive Payments
 - 171 For claims submitted for a grant reduction, termination or denial which occurred before January 1/ 1981/ four calculations will be made/
 - 1711 Detethine the andunt of the tethodetive venefit from the the trades tile of trom intormation supplied by the FTB and/of the IRS (see section bu-016/61/
 - 1712 Multiply the amount of the monthly tettoactive benefit by the appropriate percentage as set forth in section 80+016/79/
 - 1713 Multiply the same tettoactive benefit amount by the appropriate percentage for the month in which the payment is authorized as set forth in section 30+016/791/
 - /714 Add andwhis in sections 30/016/711/ /712 and /713 to attive at the tettoactive payment/

172 Examples

/721 For a claim submitted for a grant teduction/ tetmination of denial which occurred before January 1/ 1981/

1722 Add the amount of the fetfoactive benefit to the intefest computed above to detefnine the fetfoactive payment!

 Rettoactive
 Rettoactive

 Benefit
 f
 Interest
 f
 Interest
 f
 payment

 \$300/00
 \$19/20
 \$217/38
 \$336/38

handbook ends here

- 173 Fot claims submitted fot a grant teduction, tetmination of denial which occurred after January 1/ 1981/ three calculations will be made!
 - 1731 Detetnine the amount of the fettoactive benefit an individual class member feceived for each claim of fettoactive eligibility/
 - 1732 Multiply the amount of the fetfoactive benefit by the appropriate percentage for the month in which payment is authorized/ as set forth in section 30+016/792/
 - /733 Add amounts in sections 80/016/731 and /732 to attive at the tettoactive payment/

174 Examples

1741 Fox a claim submitted for a grant teduction/ termination or denial which occurred before January 1/ 1981/

INONEH OF RETTOACTIVE Benefity

Jun∉ 1982

≠ \$ 300

Kinterest percentage to be paid in payment anthorization monthy

x March 1988

\$ \$ \\$83B

Interest amount \neq \$175/08

1742 Add the amount of the monthly tettoactive benefit to the intetest computed above to determine the retrodetive payments

Rettøa¢tive

R∉ttøa¢ti√€

Benefit / Intetest

Benetit

#

\$300/00

\$175/08

\$473/08

handbook ends here

- 178 If a claimant has his grant reduced, terminated or denied due to the teceipt of an income tax tetund for more than the one month in the tettoactive periods/ add all tettoactive payments together to arrive at a total tetroactive bayment!
- 176 Rettoactive verelits teceived shall not ve used to offset overpayment incurred before August 31/ 1982/
- 177 Determine the total retroactive payment and send the appropriate non as specified by spss within 90 days of the date the claim is received if case tecota intotmation is available! It tax tecota intotmation must be regrested from the FTB and/or the IRS/ an additional 30 days after the information is received by the CND will be dermitted for processingl

178 Maximum aid Payments in the retroactive Periods

MXXIMUM AID

\$i≠¢ ø£	1/01/79+	7/01/79+	7/01/81+
j r j styt	<u>\$/3\$/7\$</u>	<u>8/30/80</u>	8/30/82
1	\$17B	\$ 2 01	\$ 248
2 3	287	331	4Ø8
3	38B	4 1Ø	\$Ø\$
4	423	487	ØØ1
4 3	48 3	338	Ø 8 Ø
Ø	54 3	ø 2 \$	771
7	\$\$\$	Ø Ø Ø	8 4 6
Ø	Ø 4 9	747	922
Ø	7Ø1	8 0 7	996
10 ø±			
tγφ‡∉	7\$ 4	8 8 8	1/Ø71

179 seven percent 1781 interest factor table

January 1979 through december 1980*

<u>Rettodetive</u> <u>Benefit</u>	december 1880
January 1979	11400
¥¢b±4á±¥ 1979	11340
Mat¢n 1979	/1287
*\$### 1979	/1227
May 1979	/117ø
<i>\$</i> 1479	11110
<i>\$</i> 41¥ 1979	11033
AUGUSŁ 1979	/Ø993
\$&pt&db&t 1979	1Ø\$3 4
Ø¢£øÞ¢£ 1979	/Ø87ø
Nøyenbet 1979	/Ø817
D&¢&ND&x 1979	/Ø7\$\$
January 1980	/Ø7ØØ
f¢bt4aty 1980	/ ØØ 4 Ø
naten 1980	/Ø\$\$7

tspss is paying seven percent (7%) simple interest on retroactive benefits for the period priot to danuary 1981. The interest factors shown above provide the factor to be used in the first step of computing retroactive benefits for claims submitted for benefit months priot to danuary 1981.

1791 Ten Petcent 1108y Intetest Factor Tablet

January 1981 through november 1988 Payment Authorization Month

R&LYØ&¢LIV&									
Benefit Month	<u>03/88</u>	<u>Ø4/88</u>	Ø\$/88	Ø\$/\$\$	Ø7/88	Ø8/88	09/88	10/88	11/88
Jan/ 1979	1724¢	17329	17414	1749B	17881	17888	17748	17833	17913
r¢b/ 1979	1724¢	17329	17414	1749B	17881	1788B	17748	17833	17913
Mat/ 1979	1724¢	17329	17414	1749B	17882	17888	17748	17833	17918
AØ\$\$1 1979	1724¢	17329	17414	17496	17581	/7\$\$\$	17748	17833	17918
May 1979	1724¢	17329	17414	1749B	17581	17888	17748	17833	17918
Jun≠ 1979	1724¢	17329	17414	1749B	17881	/7øøø	17748	17873	17913
J41¥ 1979	1724B	17329	17414	1749B	17881	17888	17748	17833	17918
AUG/ 1979	1724¢	17329	17414	1749B	17881	17888	17748	17833	17918
\$¢ø≮/ 1979	1724¢	17329	17414	1749B	17581	17888	17748	17833	17918
Ø¢£1 1979	1724B	17329	17414	1749B	17881	17888	17748	17833	17915
¤ø≠/ 1979	1724¢	17329	17414	1749B	17581	17888	17748	17833	17818
D¢¢/ 1979	1724B	17329	17414	1749B	17881	17888	17748	17833	17915
Jan/ 1980	1724B	17329	17414	1749B	17881	17888	17748	17833	17913
¥¢p\ 1980	1724B	17329	17414	1749B	17881	17888	17748	17833	17918
Max/ 1980	1724¢	17329	17414	1749B	17881	17888	17748	17833	17918

tong the second step of compating tertosetive penetite for claims the interest factors shown above provide the factor to be ased january 1981/

The interest factors shown above provide the factor to be ased january 1981/

The interest factors shown above provide the factor to be ased in the fact

1792 Ten percent (10%) Interest factor Table

May 1982 theologh novembee 1988 Payment authorization nonth

Benelit nonth Benelit nonth	<u>Ø3/88</u>	<u>Ø4/88</u>	<u>Ø\$/88</u>	<u>Ø\$/88</u>	<u>Ø7/88</u>	Ø\$/\$\$	Ø\$/\$\$	<u> 10/88</u>	<u>11/88</u>
May 1982 Jung 1982 July 1982 Aug/ 1982	/\$\$7\$ /\$87\$ /\$7\$3 /\$\$\$\$	/8003 /3918 /3838 /3731	/8838 /8003 /8088	/8787 /8887 /8887 /8787	/8282 /8187 /8088 /8000	/8337 /8232 /8179 /8083	18419 18334 18282 18187	/8804 /8419 /8337 /8282	18388 18391 18419 18334

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18 Statistical Reporting

the CMD snall submit to sdss a statistical tepott no latet than

lay whimper of claims received

Aby wamber of claims vaid

- led amount of the benefits paid
- lal mampet of claims denied
- Ley reasons for denial

50/017 RUTAN ⁄ MENAHON RETROACTIVE BENEFIT COURT CASE

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11 Backatouna

The <u>Rutan</u> of that otdet ate set totth in the tollowing tegnlations,

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12 Definitions

Fox purposes of these regulations!

- 121 YCIASS MENDETSY ATE INDIVIDUALS WHO TECEIVED A IUNG SUM ON OF AFFET OF TUNE I. 1981 AND AS A TESUIT HAD THEIT CASH AID TEDUCED, DENIED OF TETNINATED AT SOME TIME DUTING THE TETTOACTIVE PETIOD!
- 172 Yintent to ciaim formy (temp 1709) 7/88y means that pottion of the
- 123 YCIAIM FOIMY (TEMP 1709A/ 7/88Y MEANS THE LOIM WHICH MUST BE COMPLETED! SIGNED AND TETUTHED TO THE APPTOPTIATE CWP LOT THE DETECTION OF A CIAIMANTIS ELIGIBILITY LOT TETTOACTIVE BENEFITS!
- 124 YRELLOSCHIME DELIOCH WESTS THAT DELIOC OF TIME DELWEEN JUNE 1/ 1983 AND AUGUST 28/ 1988/
- 123 YGOOD CAUSEY MEANS THOSE SITUATIONS WHEN THE CIAIMANTYS TAIIUTE TO TETUTE TO CIAIM FOTM LIGHT 17091 7/88Y OF THE CIAIM FOTM LIEMD 17091 7/88Y OF THE CIAIM FOTM LIEMD 17091 7/88Y OF THE CIAIM FOTM LIEMD 17091 7/88Y OF THE COMPTEN OF DIVISIONI CONDITION 2Y AT EFFOT DITECTION OF THE COUNTY OF BY OFMET EXTENDED OF CAUSE!
- 120 /Mailing CMDs/ ate those CMDs identified in subsection BO-017/324 which shall mail intent to Claim forms by August 1/ 1988 to all potential claimants identified by eithet manually seatching existing files of computet tecotas/ of those cwds identified in subsection BO-017/324 which

- /27 YFA¢&+tø+fa¢&y cwds at& thøs& cwds id&ntifi&d in subs&¢tiøn 50+017/325
 which shall ptøvidæ int&nt tø claim føtms to all t&cipi&nts at thæ time
 øf annual t&d&t&tminatiøn/ and to all applicants føt afdc b&n&fits who
 had pt&viøusly t&c&iv&d su¢h b&n&fits at any time b&tw&n June 1/ 1983
 and audust 26/ 1986/
- 128 YINIOYMEDY MEANS THAT THE CIAIMANT TECEIVED AN ADEQUATE NOTICE OF ACTION OF TECEIVED THE MOTICE INIOTMING THE APPLICANTS/TECIPIENTS OF THE LUMP SUM TULE AS TECHITED BY THE PTELIMINATY INJUNCTION IN THIS CASE!
- // Informing potentially eligible persons of the availability of Retroactive Benefits

- /31 In otdet to notify potentially eligible petsons/ sdss shall/
 - [311 Issue posters (Temp 17098) 7/88) to the cwps printed in English and Spanish with statements printed in Vietnamese/ Laorian/ Chinese and campodian/ The English and Spanish on the poster will inform the general public of the availability of benefits/ The statements will translate in substance as Ywelfare may owe you money/ You may contact your worker for a translation of this notice/y
 - /312 Provide CWDs with reproducible copies of the Intent to Claim Form NTEMP 1709/ 7/88y in English and Spanish with statements in Vietnamese/ Laotian/ Chinese and Campodian/ The statements will translate as Ywelfare may owe you money/ You may contact your worker for a translation of this notice/y
 - /313 Provide the CWDs with reproductble copies of the Claim Form
 [Temp 1709A/ 7/88] in English and the five standard languages/

handrook ends here

- /32 County Responsibilities
 - /321 All counties shall post the english and spanish informational posters in conspicuous locations in all cwp offices/ the posters shall be displayed from August 1/ 1988 through July 31/ 1989/
 - AII counties shall forward a supply of English and Spanish informational posters/ supplied by SDSS/ to all food stamp issuance outlets within the county with instructions that the posters be displayed in conspicuous locations from August 1/ 1988 through July 31/ 1989/

- /323 The Yndilingy counties identified in subsection sofoit/324 shall identify all discontinuances and denials as a fesult of the fectiot of lump sum income duting the fettoactive period through the use of computer generated fepotts of by manually searching through case fecolds/
- /324 The Yndilingy counties shall mail an Intent to Claim Form on of Defote August 1/ 1988 to all potential class members/ The Yndilingy counties are!

Alaneda! Alpine! Anadot! Contta Costa! Del Wotte! El Dotado! Stanislava! Tenana! Tulate! Ventuta! and Yuba!

1328 the itacettoteacei counties shall screen all cases at the time of application and at annual redeternination for a one year period application and at annual redeternination for a one year period application of ineligibility of case aid reduction during the lime of application and at ineligibility of case aid reduction during the lime of application and period. The itacettoteacei counties at the time of

Butte/ Calavetas/ Colusa/ Glenn/ Humboldt/ Impetial/ Inyo/ Kings/ Cake/ Lassen/ Los Angeles/ Matiposa/ Napa/ San Benito/ San Diego/ Snasta/ Sietta/ Siskiyou/ Suttet/ Ttinity/ Tuolunne/ and Yolo/

- /328 AII counties shall teptoduce an adequate supply of the English and Spanish Intent to claim forms specified in Subsection 30+017/312/ and shall give or mail such notices to anyone upon teguest!
- /327 All counties shall teptoduce an adequate supply of the claim roth the Intent to claim form unless it is determined itom case tecotas the Intent to claim form unless it is determined itom case tecotas that the claimant is not eligible for tettoactive penefits.
- 1318 If work than one cup is listed on the intent to ciaim form, the chair hote than one cup is listed and all tecords in their
- 133 All connties shall designate at least one endloyee to answet guestions on the claim form.

14 Application for Retroactive Benefits

141 Claimant Responsibilities

/411 The claimant shall complete and sign/ under penalty of perjury/
the intent to claim form/

- they here living in when they received the lump sum payment!

 And the claimant has provided a name! address! social here when the county it any! and the county is a motice of intent in when they received the lump sum payment!
- /412 The claimant shall complete and sign/ undet penalty of perjuty/ the claim form/
 - lay a claim form shall be considered complete when the claimant has provided a response to the following guestions!
 - (1) The amount of the lump sum payment which was spent before he/she received written notice of the lump sum rule!
 - (2) Mov the money was spent/
 - (3) The anount of income, if any, received in any month of the disqualification period, as originally determined.
 - (4) Whethet the claimant held non-exempt tesoutces in excess of \$1/000 duting the disqualification period.
 - lby the members of the household during the disqualification beriod!
 - lby the mannet in which the family sutvived duting the disgualification betiod/
- /413 The claimant shall submit the intent to claim form to his/het local cub/
- INTERPOLATION TO CLAIM FORM IN THE MNAILINGY COUNTIES (SEE SUBSECTION AS CLAIMANTS IN THE VEACETFONT WORL COUNTERS COUNTIES AND THE CAND TO CLAIM LOTH IN THE CLAIMANT NAS NOT REEN NOTITIES AND THE LUCKLE OF THE CADIMANT SHALL NAME THE SAME SAME SAMES THOW THE CADIMANT SHALL NAME THE SAME SAME SAMES THOM AS CLAIMANT SHALL NAME THE SAME THE SAME TOTAL SHALL NAME THE SAME SAMES THE SA
- 1413 The Intent to Claim Form in the Yface/to/Facey counties shall be tetutned within 30 days will be detmitted!
- /418 The claimant shall tetuth the claim form to the tesponsible cwp ho latet than 80 days aftet teceipt unless good cause exists/ whereupon up to an additional 30 days will be betmitted/
- /417 The claimant shall be petmitted to tesubmit a pteviously denied the petiod an otiginal claim form may be submitted!

142 CWD Responsibilities

- 1421 In the Iface/to/face! counties statting August 1, 1988, the Intent to Claim form shall be provided to all recipients of affoc benefits at the time of annual redetermination, and to all applicants for Affoc benefits who had previously received such benefits at any time between June 1, 1983 and July 31, 1988, cwbs shall document in the case file that the intent to Claim form was diven!
- 1422 Indiling connties, shall mail intent to ciaim toths by angust 1/
 1988/ The mailing shall be to all potential class membets
 identified by mannally seatching computet listings of by
 generating a specific computet tepott/
 - Ad If an Intent to Claim Form is tetutned as undelivetable, the CWD shall teview the Medical Eligibility Data System (MEDS) and food stamp tecotds to detetmine the most tecent address available. The CWD shall then mail to the modelivetable, the cwd stamp fevolds to detetmine the most tecent address within 18 working days.
- /423 Uniess the exidence indicates otherwise/ the date the claim form of the intent to claim form is submitted shall be determined as follows!
 - lar the postmatk date of the envelope when the claim is mailed to the cwo/ of
 - (b) the date standed on the claim form by the cwd, when the claim
 is delivered in person to the cwd, or
 - les ages the ciaim form was signed by the ciaimant, when the
- clainant teceined the loth the clain shall be devied!

 Ala mithin 10 calendat days after teceining the latesthing the devied!
- /428 Before providing the claim form (temp 1709A/ 7/88Y/ the CWD shall fill in the following information:
 - lay the datelsy upon which the class member feceived a lumb sum!
 - (b) the date/ if any/ the county sent the class member written notice of the terms of the lump sum rule!

- (1) This date shall be placed in the sentence on the fourth line of the left-hand column. That line shall read \(\lambda \lambda \lamb
- (c) The period of ineligibility as originally determined!
- /428 when an intent to ciaim form is submitted to the cwp by a diaimant/ the cwp shall attempt to locate a case record including a medifcal case record for the claimant/
- /427 In the event a CWD detethines a loth was not teththed in a timely mannet/ it shall deny the claim and send an mon to the claimant advising of its detethination and of the claimantly tight to teduest a heating/
- 143 When a claim form is returned to the claimant as incomplete and is not returned within 30 days! the CWD shall attempt a personal contact to assist in completing the form before denying the claim as incomplete!
- /44 In each case where a claim is filed/ the CWD shall maintain all documents until the end of the claim period/
 - /441 The CWD shall stand each claim form with the date the form was teceived and shall tetain all envelopes that were postmarked after the close of the claim period/
- /43 There shall be a reductable presumption in the Intent to claim form has timely received!
- 146 thete shall be no otal screening of potential claimants! This does not conclude cwps from giving advice from which a potential claimant can conclude whether he/she is eligible of ineligible!

13 Claim(s) Processing

- /31 the CWD shall teview each claim form to determine whether the claimant has brovided a completed claim form pursuant to subsection 30/017/412/
 - /311 The CVD shall tequest further information or clarification if the form is incomplete or the information is internally inconsistent!
 - /312 If the information contained on the claim form and the case fecord
 is sufficient to verify a claim/ the county will compute
 fetfoactive benefits in accordance with subsection 30+017/8/

- 1313 Claimants may be tequested to supply documentation whete such documentation is in the claimantly possession. Whete claimants do sign a release of information form (abcom 228/ 10/78)/ enabling the county to obtain documentation form (abcom 218/ 10/78)/ enabling the denied if the claimant fails to provide documentation in their behalf. A claim may be denied if the claimant fails to provide documentation in his/her possession of sign the release of information form.
- the claim shall be devised for those months!

 the claim shall be devised for those months!

 tecord of on the claim rotm! that the claimant was ineligible for tecord of the the chimp sum received?

 tecord of on the claim rotm! that the claimant was ineligible for the Mhete the chimp sum received?
- the can detectained that the claimant is not a membet of the chain if the claim. The can shall tend of the chaim if ho tecotal the can petained in addition to cash aid case tecotal to that the claimant applied for or tecotal that a listing of cash aid case tecotal to the chaim if ho tecotal can be tound that the claimant applied for or tecotal to that a listing of cash aid case tecotal to the chaimant applied to cash the can be applied to cash aid case tecotal to the chaimant applied to cash the can be applied to claimants who were devied cash aid case tecotal to the chaimants who were devied cash aid case the chief the chaimant applied to claim the can be applied to claimants who were devied cash aid only when the can be applied to claimants who were devied cash aid case tecotal include all deviated the cash aid case tecotal include all deviated.
- oderdanneur/ the CMD shall take no intrhet serion on the teconeth of the the Innd shul ste not eligible for tertoscrime devetite' homedet! 1218 claimants who teceined an ometosyment' dat failed to timely tedolf
- 132 If a CWD teceives a claim for any period in which the CWD can determine to the vrong county! the CWD shall!
 - 1821 Fotwatal within 13 wotking days from the date of teceipt, the cothect can to the cothect can tot photostiph, his last pean forwataga to the cothect can has been fotwataga that, for the date of the chaim and that, for has been forwataga the chaim has been forwataga that, for the chaim that can be that, for the detion in addition, the can all inform the claim has been forwataga that, for the detion in direction, his last call has been forwataga to the cothect can for the chaim has been forwataga to the cothect can be the chaim has been forwataga to the cothect can be the cothect can be the cothect can be the chaim has been forwataga to the cothect can be the cothect can be can be the cothect can be can be cothect can be cothected.
 - /322 Fot the putpose of establishing a timely submission of a claim/
 the date the claim form was submitted to the fitst cwp/ as
 determined in subsection 30+017/423/ shall be considered the date
 of submission to the second cwp/

- /323 the CND shall deny that petiod elained in which the cottect CND cannot be deternined from the information on the claim form. The CND shall return the Claim form, of a copy thereof, together with the NOA informing the claimant of the denial and right to a neating.
- /B3 If the claimant does not tethin the claim form to the tesponsible cwd denied! The cwd shall be determination and the claimantys tidht to a neating!
 - /331 If the claimant fails to tetuth the claim form but has good cause, the claimant shall be dethitted up to an additional 30 days from the date of the good cause determination to return the claim form. The claim form in no case shall be accepted later than January 31, 1990.

IB Calculation of Retroactive Benefits

- /61 The information contained in the case fecord shall be used to determine the amount of fetfoactive benefits!
- /62 In the event that the information the claimant has provided on the cupys records to determine the information contained in the cupys records to determine the information the benefits!
- the the the that hothle henefit will be calculated using the last the thethothation is not available of is insufficient, the
- /84 When the case tecota contains sufficient information of when the retroactive venefits are veing computed from the information contained on the claim rotm, the CWD shall determine the amount of the retroactive venefits as follows!
 - lbai fot each inno sum teceived in the tettoactive detiod, detetmine the amount of money which was still available to the claimant when the amount defote he she the lump sum tule. Any money spent by the claimant befote by the claimant befote by the claimant befote he she in the tettoactive detion, detetmine the fount of the lump sum tule shall not be counted!
 - lbaz the andunt of money determined in subsection suffit/bal shall be alreaded by the assistance unit/s law/s/ Minimum Basic standard of adequate care at the time the lump sum was received to determine a new period of ineligibility!
 - /843 Fot each month deducted from the oxidinal period of ineligibility had for the haximum aid payment (MAP) in the tetroactive period.

1844 Maximum Aid Payments (MAP) in the Retroactive Period

Maximum aid payment

SIZ E Of FBV	\$/1/83 / \$/38/83	7/1/83 / 8/30/84	7/1/84 / 8/30/83	7/1/85 / 8/30/86	7/1/86+ 7/31/86
1	248	2 \$8	272	288	3Ø3
2	4 Ø8	424	448	474	498
3	zøg	32 8	333	\$ \$7	Ø17
4	ØØ1	Ø 2 \$	ØØØ	B B B	734
\$	686	713	733	79 6	837
Ø	771	802	\$47	893	941
7	846	øøø	929	982	1/032
ø	922	939	1/013	1/071	1/128
ø	996	1/036	1/094	1/138	1/218
1Ø ø≠ \$hø≠€	1/071	1/114	1/178	1/243	1/306

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- /BAB PETETHINE THE ANGUNT OF CASH AID ACTUALLY TECEIVED BY THE CLAIMANT AND COMPATE IT TO THE COTTECT GYANT FOT EACH MONTH IDENTIFIED IN SUBSECTION BOFOLLOGIS!
 - lay it the cash aid teceived is less than the cottect grant/ the daid in accotdance with subsection 80/017/7/
 - tertogative pevetits to be daid nudget suprection 20/011/1/
 and any amounts dietionsly teconded susil be courided
 and any amounts dietionsly calculated fot that mouth due
 an overdayment has dietionsly calculated fot that mouth due
 (b) If the cash aid teceived is the same as the correct grant and
 - ciain anali re devied! those montha! the ciaimant is not a ciasa wemret and the no operparment has prepionall calculated of reconded tot (c) it cash aid teceined is the same as the cottect ataut(s) and

- /BB CWDs shall notily claimants of the disposition of their claims and pay the claimant if approved within 90 days from the date the form is received unless a claim is submitted incomplete, whereupon an additional 30 days shall be permitted for processing.
- 17 Computation of the Total Retroactive Payment
 - /71 The CWD shall compute the amount of payable tettoactive benefits for each month as follows!
 - /7/1 Multiply the amount of monthly tettoactive benefit by the appropriate percentage for the month in which payment is authorized, as set forth in subsection /713/a//

Example

ndnth of rettoactive febtuaty 1985 / \$555/00 Benefit

Interest retentage \times september 1988 \neq \times 13668 \times 14564684 \times 266464644

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/712 Add the angunt of the monthly tettoactive venefit to the intetest as computed in section sofoll/111 to detetmine the monthly tettoactive payment/

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Example

R¢tt¢d¢ti√¢ B¢n¢fit + Int¢t¢st + R¢tt¢d¢ti√¢ B¢n¢fit \$333/00 \$203/46 \$738/46

handrook ends here

1713 Determine the total amount of the retroactive payment by adding together the monthly payments as computed in Section 30+017/712/

nandbook begins here
(a) rettoactive benefit month + 1983

ифићи Вићифћућаћуфи Раћифић	Ø/\$3	7/83	\$/\$3	9/83	10/83	11/83	12/83
8/88	13238	18178	1 2020	/8008	14923	14838	14788
9/88	13340	18288	18173	12088	\2002	14921	14878
10/88	13423	18342	18288	18173	12020	12002	14923
11/88	13397	18428	18340	18288	18273	/2088	/\$ØØ\$
12/88	18882	1881ø	18428	18340	12228	18173	/2020
1/89	18877	18888	18810	18428	18342	18288	18178
2/89	13733	18671	18886	1330 4	18419	18334	18282
7/89	12818	18788	18871	13389	18804	18419	18337
4/89	13921	18838	18783	18871	1338B	18801	18419
\$/\$9	18002	18923	18838	1878B	18871	/8888	/\$\$ Ø 4
Ø/89	18088	18002	18921	18818	18783	12888	/8888
7/89	18173	1888	18008	13921	13838	18783	18871
8/89	18288	18178	18090	ibdar	18923	18838	/\$7\$¢
9/89	18340	18287	18173	18888	18008	13921	18838
10/89	18428	18342	18288	18173	1 8080	/RDDR	18823
11/89	18887	18428	18340	18233	18173	1 8088	/ B B B B

ldl bettoactive benefit month / 1984

rettoactive benefit month + 1988

ldl bettoactive benefit nouth + 1986

ифићи Уптифъттаттфи Баћифић	1/88	2/88	3/88	4/88	3/86	Ø/8ø	7/88
8/88	12888	12584	12807	12422	12340	12233	/2173
9/88	12781	12888	12389	12804	12422	12337	12233
10/88	12838	12751	12874	12389	12807	12422	12340
11/88	/2918	12833	12788	12871	12589	12804	12422
12/88	13003	12918	12841	/27\$\$	12874	12389	12307
1/89	13088	13003	12928	12841	12789	12874	12392
2/89	13184	13079	13003	12918	12838	12781	12668
3/89	13249	13184	13088	13003	12921	12838	12783
4/89	13332	13247	/317ø	13085	13003	12918	12838
\$/\$\$	13418	13332	13233	13270	13088	13003	12921
g/89	13499	13414	13337	13232	1317ø	13083	13003
7/89	13584	13499	13422	13337	13233	1317ø	/3Ø88
8/89	13889	13584	13507	13477	13340	13233	13173
9/89	13781	13888	13589	/33Ø4	13422	13337	13233
10/89	13838	13781	13874	13389	<i>13</i> 507	13422	1334Ø
11/89	13918	13833	13788	13871	13889	/38Ø4	13433

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- /72 Retydactive venetits teceived shall not ve used to ofiset an overpayment incurred velore revivary 20/ 1988/
- 173 Rettoactive venetits teceived shall not ve consideted income of as a tesoutce in the month teceived and the following month.

18 Statistical Reporting

- /BI THE YMAILINGY CWPS IDENTIFIED IN SUBSECTION SOFOI7/324 SHALL SUBMIT TO SPSS!
 - 1811 A statistical report no later than november 7/ 1988 indicating/
 - lay Now many Intent to Claim Forms were mailed out!
 - ld) If the county mailed to an overinclusive class of persons/
 - lei a description of the class of persons to which intent to
 - 1812 A final statistical teport no later than May 8/ 1989 indicating/
 - lay the total numbet of intent to claim foins ofovided to claimants!
 - LBY The humber of claim forms provided to claimants!
 - led the unumer of claims received!
 - ld) the humber of claims denied as untimely!
 - ley the humber of claims denied as incomplete!
 - lty the number of claims denied because the claimant was not a member of the class!
 - ldl the number of claims denied because the claimant was not substantively eligible for retroactive benefits! and
 - lny the numbet of claims granted in whole or part la claim paid in part shall not be considered a denialy!
- /82 The Yface+to+facey cwds specified in subsection 80+017/328 shall submit to sdss/
 - /871 Three reports submitted on a quarterly basis with the first report due november 7/ 1988 which state for each month!
 - lay the number of intent to claim forms profided to the claimants!

- (b) the humber of intent to ciain forms returned to the cub! and
- led the hamber of claim forms distributed!
- /877 The foutth tepott due august 7/ 1989 shall contain the same infotmation as the final tepott of the Ymailingy cubs (see subsection 80/017/81)/
- /823 The fifth and final report due reprudry 7/ 1990 shall be an updated version of the yrace-to-tracey cups fourth report.

80+019 WRL 4/ WOODS RETROACTIVE COURT CASE

80/019

handbook begins here

11 Background

The wrv of det that involve tettoactivity are set totth in these teghlations of the otdet that involve tettoactivity and the time of the californs in the peoplication of the california peoplicants of social settion abtically. The complaint alleged that applicants were utongfully denied in sactamento county superior court. Under the tetms of lawsuit was signed in sactamento county superior court. Under the tetms of lawsuit was signed in sactamento county superior court. Under the tetms of laws aid tecipients about possible retroactive benefits. The provisions of the otder that involve retroactivity are set forth in these regulations.

handbook ends here

12 Definitions

For the purposes of these regulations!

- 121 YCIASS MEMBEYSY MEANS THOSE INDIVIDUALS WHO!
 - /211 Applied for and were granted appe between rebruary 4/ 1982 and April 21/ 1988/ and
 - /212 Were wrongfully denied immediate Need payments due to the application of Section 40+1291 and
 - 1213 Had the beginning date of cash aid delayed as a tesult of the viongful denial of the teguest for an innebiate need paynent!
- /22 YFive standard languagesy means spanish/ Vietnamese/ Laotion/ Chinese/
 and Cambodian/
- 123 YIMMEDIATE NEEDY MEANS A CONDITION THAT EXISTED DUTING THE TETTOACTIVE DETIOD WHEN!
 - 1231 The claimant had an emergency situation! and
 - 1232 The claimantly tesoutces where less than \$100/ and
 - /233 The available fesoufces could not have met the claimant/s emergency situation/
- /24 YINIOIMING/CIAIM IOIM (TEMP 1783/ REY/ 3/91)Y MEANS THE IOIM WHICH INIOIMS POTENTIAL CLAIMANTS ABOUT THE COUTT CASE AND IS USED TO FILE A CLAIM/

- /241 The TEMP 1788 shall be printed in English and the five standard languages!
- /242 The TEMP 1783 shall be completed/ signed/ and tetutned by the claim detetmination process/
- /23 YInforming worldey (trup 1786) ref(3/91) means the form mailed to current recipients as a ymedifcal stuffery to inform potentially eligible persons of possible retroactive benefits!
- 126 iniquid resoutces, wegus teroutces which mete immediately amailable and teroutces which mete the claimantle
- 127 YNOAY MEANS A NOLICE OF ACTION (NOAY that is considered to be adequate to be yinformedy of the outcome of a claim when the claimant is provided with a noa!
- 128 YRESPONSIBLE CWDY WEARS THE COUNTY WEITSTE DEPOTETHENT THAT TOOK THE
- /29 YRELLOACLIVE PELIODY WEARS THE PELIOD OF LIME PELVEEN FEBLUALY 4/ 1982 and April 21/ 1988/
- 13 Informing of possible retroactive benefits
 - /31 CDSS Responsibilities

CDSS SNAII!

- /311 Individe temp 1786 with the medifcal cards issued to cash aid fedipients for the month of may 1991/
- 1312 Fot cash aid tecipients who do not teceive a neditcal catal nail the TEMP 1786 at the same time neditcal catas ate issued fot cash aid tecipients fot the nonth of May 1991!
- 1313 Issue 1410/4140 Posters (TEMP 1792/ Rev/ 3/91//
 - lay the temp 1792 shall be printed in pholish and spanish with the bullets printed in vietnamese, laotian, chinese, and cambodian/
 - XIY The English and Spanish entries shall intorm of possible retroactive benefits!
 - (2) The bullets shall state (as translated)! Ywelfate may ove you money! You may contact the welfate department for a translation of this notice or call this toll free numbery!

- (b) supplies of both the english and spanish vetsions of the temp 1792 shall be sent to cups for posting from may 1/ 1991 through June 30/ 1991/ these supplies shall be sent by spss no later than april 20/ 1991/
- led supplies of the temp 1792 shall be sent to cups for distribution to food stamp issuance offices for posting from may 1/ 1991 through June 30/ 1991/
- /d/ Posters shall be sent to up to 100 addressees to be supplied by the plaintiffs up to a maximum of 100 posters/
- /314 Make available up to \$30/000 for a summary or copy of the temp 1783 to be published in the newspapers or other media of plaintiff's choice/
- /313 Płoyide CNDs with łepłodwcible copies of the TEMP 1783 in English and the five standard languages/

132 CWD Responsibilities

CAMP RNAII!

- 1321 Post the Trmp 1792 in English and Spanish in conspicuous locations in all CVP offices from May 1/ 1991 through June 30/ 1991/
- /322 Fotvata a supply of Trup 1792s in English and Spanish to all Food Stamp issuance outlets within the county with instructions that the postets be displayed in conspicuous locations from May 1/ 1991 through June 30/ 1991/
- /323 Reproduce an adequate supply of the temp 1788 in English and the

1324 Give of mail temp 1788s to anyone upon teguest!

14 Application for Retroactive Benefits!

141 Claimant Responsibilities

The claimant shall!

- /411 Profide a completed (see section 30/019/311) signed temp 1783/ The temp 1783 shall be signed under denalty of deriviv/
 - veeded intothation/

 In a cam tedrites additional intothation the claimant the capiest and identity that has peen owitted thow the lutothation to tethth the thundry days thow the date the cap that has peen owitted intothation to tethth the the cap tedrested intothation/ a mod the has peen owitted the the the the cap tedrested intothation/ a mod the capimant and identity the cap tedrested intothation/ a mod that a cap tedrested intothation/ a mod tedrested intothation/ a mod that the capimant intothation the capimant the capimant intothation the capimant the capimant that the capimant intothation the capimant the capimant that the capimant that the capimant the capimant that the capimant

- /412 Submit the Temp 1785 to the local CWP of to the fesponsible CWP/ The Temp 1783 shall be submitted of postmatked/ if mailed/ no later than June 30/ 1991/
 - lay the claimant shall be dethitted to tesubmit a dtehiously denied claim duting the detiod trom may 1/ 1991 through dud 30/ 1991/
 - (b) If the ofiginal temp 1788 is submitted within the period, but is tetuthed for additional information of forwarded to the date of the ofiginal submission is the date of the ofiginal

142 CVD Responsibilities

when a temp 1788 is submitted, the cwp shall!

- /421 Stand each temp 1783 with the date feceived and fetain all envelopes that wefe postnatked after June 30/ 1991/
- 1422 In each case where a claim is filed, maintain all documents until the end of the claim period.

1423 Attempt to Iocate a case tecoral

1424 Determine if the CVD is the responsible CVD/

- (a) If the teceiving cup detethines that it is not the chain the chain the chainant a mon (m30+019ct rev) deny the claim, send the temp 1788 to the tesponsible cup within 18 working days from the date of teceivt!
 - linitially teceived by the fitst cwpl
 - 1787 the teceiving cwd shall send the tesponsible cwd the tenp 1788/ any suppotting documentation/ and a copy of the woa (wbo-folect) sent to the claimant!
- (b) If the teceiving detetnines that it is the tesponsible cup/ process the claim/
- kel it the tesponsible and equipt be detethined, deny the claim

18 Claims Processing

The tesponsible CWD shall detethine whethet the claimant is a class member and take appropriate action within BO days of teceiot of the oxidinal claim/ the CWD shall!

/31 review each temp 1783 feceived/

- /311 THE TEMP 1783 is complete when the claimant has provided the following information!
 - lay claimantys social security numberl
 - (b) case name(s) during the retroactive period/
- /312 The following information shall be provided on the TEMP 1783 to the fullest extent possible!
 - lay conntyliesy of tesidence during the tettoactive periodl
 - (b) the approximate date(s) of the application(s) for ard the tetroactive period(
 - lhe tettoactive vetioal
 - (d) Whether Innediate need of other assistance was granted based on the application(s) during the retroactive period(
 - Yel anat emetaench situations the tamily had anich it could not weet of mete not met by the connty pased on the application(s) duting the tettoactive period(
 - LAY Claimanty's current address!
- /52 RECNEST INTEXTALION OF CLATIFICATION IF THE FORM LACKS ESENTIAL INTOTALION OF THE INTOTALION IS INTEXTALLY INFONSISTENT!
 - /321 the CND shall complete claim processing and pay the claim without/ to the extent possible/ regulting claimants to come in person to the local of the responsible CND/
 - /BZZ As necessary/ reguest that the claimant supply documentation in support of the claim if such documentation is in the claimant/s possession/
 - (a) As necessaty/ if the claimant does not have documentation in his/net possession/ tequest that the claimant sign a release of information form labour 228 (rev. 10/78) of cwp equivalent form)/ to allow the cwp to obtain documentation on the claimant/s behalf!
 - (b) If the claimant fails to provide documentation in his/her the claim and send a wor (wso+ older) to the claim and send a wor (wso+ older) to the claim and send a wor (wso+ older) to the claimant/

- 183 Compare information on the Temp 1788 to information in the case record!
 - /B31 If the information the claimant has provided on the temp 1788 conflicts with the information contained in the case record/ use the information contained in the CWPs records to determine eligibility for retroactive benefits/
 - /332 If ¢asé fécord information is not available of is insufficient/ vse information provided by the claimant on the Temp 1783 to determine eligibility for fetroactive benefits/
- /B4 If the CMD detethines that the claimant is not making a claim for a claimant/
- /BB If the TEMP 1788 is not complete, as specified in Section 80/019/311/
 send a non (ns0/019dt) to the claimant to tequest additional
 information. If the CWD requests additional information from the
 claimant, the CWD shall have an additional in days from the feceivt of
 the feturned information to process the claim.
- /BB If the ofiginal temp 1783 is submitted, but is not feceived within the period from may 1, 1991 through June 30, 1991, deny the claim and send a noa (nsofolybr) to the claimant.
- /37 If the CWD can find no tecoto that the claimant applied for or teceived cash aid duting the tettoactive petiod/ deny the claim and send a mor (N30+019bt) to the claimant/
- /38 If more than one eligible claim is made for a specific instance of eligibility for retroactive benefits/ the first such claim filed shall be processed and any subsecuent claim denied/
- /39 If the claimant is a class member, compute and pay tettoactive benefits.

lb computation of retroactive benefits

tettogetive petiod/ tettogetive petiod/

/BII No interest shall be paid on the retroactive benefit!

- /bz rettoactive benefits ate considered income of as resources for grant calculation in the month received and the following month!
- /b] to the extent permitted by federal law and regulations/ retroactive of eligibility in the food stand program/

- let kertoactive penetits and overpayment occuring briot to october 31/ 1987/

 let kertoactive penetits and overpayment occuring briot to october 31/ 1987/
- tepotting document!

 IBS Counties shall ensuite that tettoactive benefits shall not be considered

 IBS Counties shall ensuite that tettoactive benefits shall not be considered

17 Statistical Reporting

171 the CNDs shall submit a statistical tepott (temp 1172a ref) 3/91y no latet than octobet 18/ 1991 indicating the/

1711 Number of temp 1783s received!

172 The CWDs shall submit a second statistical tepott (TEMP 1172B Ref) 3/919
no lates than January 18/ 1992 indicating the/

1721 Number of Temp 1788s provided!

1722 Number of temp 17888 received!

- 1723 Winder of claims denied because the temp 1783 was not teceived by the local of the tesponsible cwd belote june 30/ 1891/
- 1724 Wunder of claims denied because the eligibility to retroductive benefits cannot be established based on the case record information life anyll the documentation submitted by the claimant (if anyll and the remp 1785)
- 1723 Winder of claims denied because the claimant was not a class member!
- 1728 Númbet of claims denied by the teceiving cup vith a tefettal to another cup.
- /727 Number of claims denied because they were not submitted to the

1728 Wunder claims denied for all other reasons!

1729 Number of claims granted!

Authotity cited: sections 10333 and 10334/ Welfare and Institutions code!

Reference!

Welfate Recipients/ Leagne/ Inc/ y/ Woods/ (Stipulation of the State of California/ County of Sactamento/ Octobet 31/ 1990/

\$\$\dagger \quad \qq \quad \qua

80/020

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11 Background

The <u>sallis</u> of <u>nemanon</u> lawsuit enallended the ¢alifotnia pepattnent of social setvices! KCD\$\$// policy of denying income distegates tor state disability insurance (sdi) benefits to families receiving aid under the aid to with dependent ramilies ¢n#1dr¢n *(*apdc) Program/ On January 30/ 1991/ the Final Order settling the lawswit was entered in sacramento COUNTY SUPERIOR COURT! Under the terms of the otdeti cdee and connty meltate depattments possible tettoactive benefits! The provisions of the order that involve retroactivity are set forth in these regulations/

22+001al A claimant

Vietnamese/ Lad/ Chinese and Cambodian/

claimant is provided a NOA/

lintolned, of the ontrove of a ciain mhen the

handbook ends here

12	⊅∉££	nitions	Fot the putposes of these tegulations!
	/21	ciąż newast	iclass newbersy weads those individuals and
		1211 apd¢	Nexe dranked afoc bekveen june 1/ 1987 and Naxen 31/ 1991/ and
		/212 \$\$1	Received State Disability Insutance benefits/ and
		/213 Vistegatas	Wete denied eathed income distegatus available in the Afdc Ptogtam fot SDI benefits (MPP Sections 44+1111/2 and 44+ 113/27/
	122	T&n <u>d</u>	hiend isod, weave the intothing/ciain tot tend isod (kea/ 1/21) anich is the toth anich poteutiai ciaimante nee to tile a ciaim tot tettoactiae penetite/
		/221 Langvages	The Tend 1800 shall be printed in English and the five standard languages!
	123	MOM	anaii re au adednate notice in accotdance mith Inori means a notice of Yction (nori mhich

S∉¢tiøn

174 Five Standard Languages Yfive Standard Languagesy means spanish/

shall

128 responsible county YRESPONSIBLE COUNTY! WEARS THE COUNTY WELLATE department which calculated a claimant/s appc payments without allowing earned income distegates for SDI benefits! 126 Retrodetive Period YRETTOACTIVE PETIODY MEANS the veriod of time between June 11 1987 and March 311 19911 127 ABCDM 228 YABCPM 2284 means the release of information toth aboun 228 (rev/ 10/78) which is used to obtain documentation when the claimant does not have the necessary intornation or is nable to provide such intornation. /28 GEN 1172 YGEN 11724 means the statistical report gen 1172 (Rev. 7/91) which dathers data concerning cases which claim spi work related deductions/ 129 State Listing YState Listingy means a listing of potential class nembers who received both affic and spi benetits concurrently at some time between August 1/ 1989 and March 31/ 1991 which is provided by the state to all counties! informing of possible The county shall! Rettoactive Benefits 131 COUNTY Offices Post the Temp 1799 (Rev. 7/91) in English and

Spanish in conspicuous locations in all county ø££i¢∉\$ ttøm ø¢tøb€t 1/ 1991 NOYEMBEY 30/ 1991/

1311 Temb 1799

. •

13

Reproductivity copies of the temp 1799 shall be provided to the county no later than september 23/ 1991 by SDSS in English and Spanish with telettals for translations in vietnamesel roatian/ chinese and cambodian/

nandbook begins here

(a) English/ The English and Spanish entries on the Temb Spanish 1799 inform potential claimants and the deneral public about possible retroactive benetits!

YPX K&t&t\al føt øtnet Languag∉s The telettals fot translations on the temp 1799 state (as translated)!

Ywelfate hay one you noney! You hay contact the wellate department for a translation of this noticely

handbook ends here

/32 Føød Stamp Issuance øutlet Fotward a supply of Temp 1799 in English and spanish to all food Stamp issuance outlets within the county no later than september 23/1991 with instructions that the posters be displaced in conspicuous locations from october 1/1991 through november 30/1991/

133 Claim Forms

the county shall!

1331 past afdc Røcigiønt nail a temp 1800 to the last known address of potential class members provided by SDSS who are not currently receiving appc. But received ald at some time from July 1. 1989 through narch 31. 1991.

1332 Others on Reduest Provide or mail a remo 1800 upon reguest to

14 Claims for Retroactive Benefits

/41 Claimant Responsibility

Those claimants who are not currently on appear and who appear on the state listing of claimants who do not appear on the state listing shall!

1411 File Claim

Complete and sign under penalty of perjury the temp 1800/

1412 Deadline

submit the temp 1800 to the local county of liter than november 30/ 1991/

lay kesubwit

the claimant shall be permitted to tesubmit a previously denied claim during the period

RUDUITTEA VDY DATE The date of the original submission shall be the date of the claim when the ofiginal temp 1800 is submitted within the period, but is teturned for additional information of forwarded to another county!

/42 Current recipient/s responsibility

tettoactive pevelital

A tecipient and is contieve the contination for the tecipient and the tecipient

143	¢ønnty
	Responsibilities

The county shall!

1431 bate received

stand each lend 1800 mith the date teceived

1432 Maintain Record

Maintain all documents until the end of the filed!

1433 ¢ase Łocation

Attempt to locate a case tecoral

/434 R&\$p\$n\$2bZ& ¢\$unty Petetnine which county is the tesponsible

CIAIM TYANSIGY (A) DENY/ The county shall deny the claim and send the claimant a denial mon mon-polo ct (rev/ 7/91) when the feceiving county determines that it is not the fesponsible county.

121

The date of claim shall be the date the claim

121

The teceiving county shall send the tesponsible county the Temp 1800/ any supporting documentation and a copy of the wor MBO+020 CT (Reyl 7/91) sent to the claimant within 30 calendat days!

day day (a) werd diam the fitst claim shall be otocessed and any subsecutive than one claim is made for a specific instance of eligibility for tettoactive benefits.

lel dannot detetaine The county shall deny the claim when the tesponsible county cannot be determined!

ldl Ptocess Claim The teceiving county shall process the claim when it is the tesponsible county!

13 Claims Processing

/BI State Identified CIainant The county shall determine whether the appropriate action by hovender 30/ 1991 for those potential claimants identified on the state listing who are currently receiving appc.

182	Connty time vimit	to snpwit a lewd 1800/ hithin od gahs of teceiot of a completed ciaiw totw (lewd 1800) fot those ciaiwants tednited the convit snail take apptoptiate action
183	Completeness of Claim	the county shall teylen each temp 1800 tecelyed fot completeness!
	/831 Mandatoty Infotmation	THE TEMP 1800 SHAII DE CONSIDETED COMPIETE WHEN THE CIAIMANT HAS PYOFIDED THE FOIIOWING INFOYMATION!
	lay ssm	Claimantla social secutity mumbet (88m)/
	Yp) care name	casers, vane dativa the tettoactive detioar
	l¢y bitth døt∉	Clainantl's date of bitth/
	ldl signatute	Claimantla aighathtel
	1882 Øøtiønal Inføtnatiøn	The claimant shall dtotide the following infotmation on the temp 1800 to the extent possible!
	xay qonnty	any counties of tesidence duting the
	ldl date of Sdi	The appydxinate datelsy of teceipt of the State Disability Insutance (SDI) benefits!
	K¢Y telephone	Clainantis telephone numbeti
	ldl pistitet Office	District office where the claimant received AFDC during the retrodctive period/
	x∉y addt¢\$\$	Claimant/s current address!
134	Y&tify Infotmation	The county shall compate information on the claim form to information in the case record when a temp 1800 has been submitted!
	/841 Conflicting Information	The county shall use the intothation in the case tecota when intothation the claimant has ptotided on the Temp 1800 conflicts with the intothation contained in the case tecotal
	/342 Vnayailable Case Recotd	The county shall use the information provided by the claimant on the Temp 1800 when the case record information is not available or is insufficient/

/BB Inconsistent/Lacking Information

, , ,

The county shall tequest further information of clarification within 10 calendar days from the receipt of the claim form/ when the county lacks essential information/ The county shall also request additional information of clarification when the information is internally inconsistent on a remo 1800/

1881 Intetview

the extent possible/
the county shall complete county office to
the county shall complete county office to

/332 Suppotting Infotmation The county shall feduest that the claimant supply documentation when necessary in support of the claim if such documentation is in the claimanty's possession!

lay time rimit

The claimant shall have 30 calendat days from the county teguests omitted information to tetuth the completed temp 1800/ The county shall notify the claimant with an non mbologo at left the claimant with an additional necessary information.

/b/ release of

The county shall tequest that the claimant ages hot have the information.

 The county shall deny the claim on the denial hoa mad/020 ct /keh/ 1/31/ when the claimant fails to provide documentation in his/het possession ox sign the abcum 228 of the county eduivalent/

186 County Processing Time

the claimant!

The county shall have an additional information from the county the teththed information to process the claim when the calendar days from receipt of the reththed in county shall have an additional in

187 Deny Claim

the connty shall deny the claim and send a claimant when!

1871 not class nembet

The county determines that the claimant is not making a claim for a class member!

1872 NO APDC

no tecoto that the claimant applied fot of teceived affic duting the tettoactive petiod can be found! 1873 Past Time Limit

the original temp 1800 is submitted but is not

18 Computation of Rettoactive

181 Eathed Income Distegata

The county shall tecondule the aid payment for the county shall tecondule the aid payment for

1811 No Interest

No interest shall be paid on the tettoactive benefits!

182 Net Income property

rettoactive benefits shall not be considered as rettoactive benefits shall not be considered as

183 Offset Overpayments

The county shall offset any outstanding tecoupable overpayments with tetroactive benefits due and owing!

184 Issue payment

The county shall issue payments within 20 calendar days when eligibility has been

17 Statistical Reporting

171 deadline for report

The CNDs shall submit a statistical report Gen 1172 (rev. 7/91) no later than may 31/ 1992/ indicating:

1711 Claims Received

The humber of claims received by the cubl

1712 Cases Paid

The humber of cases vaid by the cwol

1713 Claims Denied

the humber of claims denied by the cup!

1714 Benefits Paid

the total amount of benefits paid.

Authority citedl sections 10333 and 10334/ Welfare and Institutions codel

Référénce!

sections 10333 and 10334/ Welfate and Institutions code and consent dectee! Sactamento Superior court! case no! 364308/ dated January 30/ 1991!

NOTICE PUPLICATION STD. 400 (REV. 2-91)	VALCULATIONS S	CY	(See instructions on reverse)	Original For use by Secretary of State only
AGENCY CALIFORNIA DEPARTMENT	NT OF SOCIAL SERVI	CES	ORD #0295-03	
OAL FILE NOTICE FILE NUMBER NUMBERS	REGULATORY ACTION NUMBER	EMERGENCY NUMBER	PREVIOUS REGULATORY ACTION NUMBER	FILED
	For use by Office of Administra	ative Law (OAL) only		In the office of the Secretary of States of the State of California
		1995 JUN - 1	2 21 2 02	JUN -1 -2 (1995)
		ADMINISTR	JUN 12	995 Justalowick
NOTICE		REGULA	TION Office of Administration	
A. PUBLICATION OF NOT	ICE (Complete for pub			
1. TOPIC OF NOTICE Blanco v. Anderson	[mplementation	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE Notice re Proposed		4. AGENCY CONTACT PERSON	V	TELEPHONE NUMBER
Regulatory Action OAL USE ACTION ON PROPOSED N ONLY Approved as Submitted	Other IOTICE Approved as Modified	Disapproved/ Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE
B. SUBMISSION OF REGU	JLATIONS (Complete v		tions)	
1. SPECIFY CALIFORNIA CODE O				1)
TITLE(S) MPP	11-601			
SECTIONS AFFECTED	AMEND 44-317, 63-007, REPEAL	63-205, and 63-3	300	
2. TYPE OF FILING				
Regular Rulemaking (Gov. Code, § 11346) Certificate of Compliance: The prior to, or within 120 days of, the compliance of the prior to	Resubmittal agency officer named below c	Changes Without Re (Cal. Code Regs., titl ertifies that this agency comp	e 1, § 100)	Emergency (Gov. Code, § 11346.1(b)) Government Code §§ 11346.4 - 11346.8
Print Only	Other (specify)			
3. DATE(S) OF AVAILABILITY OF MODIFIED		ADDED TO THE RULEMAKING FILE	(Cal. Code Regs. title I, §§ 44 and	1 45)
N/A 4. EFFECTIVE DATE OF REGULATORY CHA	NGES (Gov. Code § 11346.2)			
Effective 30th day after filing with Secretary of State	Effective on filing with Secretary of State		ıly 1, 1995	
5. CHECK IF THESE REGULATIONS REQUIR Department of Finance (Form S		TATION, APPROVAL OR CONCURR Fair Political Practice		R ENTITY State Fire Marshal
Other (Specify)				
6. CONTACT PERSON Frank Vitulli, Chie:	f, Office of Regul	ations Developmer	nt	TELEPHONE NUMBER 651–2586
7.				n/a) identified on thi-
form, that the information	d copy of the regulation on specified on this form	is true and correct, an	d that I am the head o	f the agency taking this
signature of agency head on design	the head of the agency,	and am authorized to h	nake this certification.	DATE
to Cluse Ind	wm			JUN 1 1995
ELOISE ANDERSON, Dir	rector			

NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

RESUBMITTAL OF DISAPPROVED OR WITHDRAWN REGULATIONS

When resubmitting previously disapproved or withdrawn regulations to OAL for review, use a new STD. 400 and fill out Part B, including the signed certification. Enter the number of the previously disapproved or withdrawn filing in the box marked

"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

Amend Section 63-007 to read:

63-007 implementation of mours of operation review requirement BLANCO v. ANDERSON

63-007

- .1 (Continued)
- .2 Sections 11-601 and 63-300.38 shall be effective July 1, 1995.

Authority Cited: Sections 10553, And 10554, and 18904, Welfare and Institutions

Code.

Reference:

Section 18902, Welfare and Institutions Code, 7 CFR 272.4(g), $\underline{\text{Blanco}}$ v. $\underline{\text{Anderson}}$ Court Order, United States District Court, Eastern District of California, No. CIV-S-93-859 WBS, JFM, dated

Þ¢¢¢þþ¢f 16/ 1993 January 3, 1995.

Amend Section 63-205.1 to read:

63-205 LOCATION AND HOURS OF OPERATION OF CERTIFICATION AND ISSUANCE SERVICES

63-205

.1 Hours of Operation

CWDs are responsible for determining the location and hours of operation of certification and issuance services available to Food Stamp applicants and recipients based on an assessment of their needs. To make this determination, CWDs shall conduct an annual review of the hours of operation of Food Stamp certification and issuance offices to ensure that the needs of recipients who work are adequately met. The results of these reviews shall be submitted to the California Department of Social Services to be retained for review by the federal Food and Nutrition Service. Requirements for CWD offices that are not open to the public eight hours per day, Monday through Friday, are specified in Section 11-601.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Section 18902, Welfare and Institutions Code, 7 CFR 272.4(g), Blanco v. Anderson Court Order, United States District Court, Eastern District of California, No. Civ. S-93-859 WBS, JFM, dated perephiser 16/1997 January 3, 1995.

63-300

- .3 Filing, Notice of Right to File and Withdrawal (Continued)
 - .38 Beginning Date of Application When CWD Is Closed on Normal Work Days
 - In the event the CWD is closed during the regular eight hours of a working day as defined in Sections 11-601.214 and .215, and an application for Food Stamp benefits is deposited in a drop box, mail slot, or other reasonable accommodation in accordance with Section 11-601.311(b), the "date of application" shall be the date the application is deposited.
 - .382 In the event the CWD is closed during the regular eight hours of a working day as defined in Sections 11-601.214 and .215, and an applicant calls to make a request for emergency benefits in accordance with Section 11-601.313, the date of application shall be the date the telephone call is received.

HANDBOOK BEGINS HERE

Example: On Friday, when the CWD is closed, an applicant deposits an application for Food Stamp benefits in a mail slot designated for that purpose. The application will be date stamped with Friday's date or it will be otherwise indicated on the application that it was received on Friday, the date of application. Had the applicant made a request for Homeless Assistance, Food Stamp Expedited Services, Medi-Cal, or AFDC Immediate Need via the local telephone service on Friday, the date of application would be Friday and the application would have to be processed within established time frames.

HANDBOOK ENDS HERE

Authority Cited: Sections 10554 and 18904, Welfare and Institutions Code.

Reference:

Sections 10554, 11023.5, and 18904, Welfare and Institutions Code; 7 CFR 273.2(b)(ii), (c)(5), (f)(3)(ii), and (j)(1); 7 CFR 273.4(a)(10); and USDA Food and Nutrition Service Office, Western Region, Administrative Notice 84-56, Indexed Policy Memo 84-23; And 7 U.S.C.A. 2020(e)(2); and Blanco v. Anderson Court Order, United States District Court, Eastern District of California, No. CIV-S-93-859 WBS, JFM, dated January 3, 1995.

Adopt Chapter 11-600 and Section 11-601 to read:

Chapter 11-600 LAWSUITS INVOLVING MULTIPLE PROGRAMS

11-601 BLANCO v. ANDERSON LAWSUIT

11-601

HANDBOOK BEGINS HERE

.1 Background

The Blanco v. Anderson lawsuit challenged the closure of county welfare department (CWD) offices during regular business hours except Saturdays, Sundays, and legal holidays.

The initial decision, issued on December 16, 1993, addressed only the closure of CWD Food Stamp offices without first having completed a review of the office hours of operation as required by federal regulations at 7 CFR 272.4(g). Emergency state regulations implementing the specific federal regulatory requirements for the required annual office hours review were effective June 1, 1994.

The final judgment, issued December 20, 1994, and amended January 3, 1995, finds that by allowing CWDs to close their offices during the "regular eight hours of the working day," class members have been denied their right to apply for and receive Food Stamp, AFDC, homeless assistance, and Medi-Cal benefits. The court ordered that when the CWDs are closed during the regular eight hours of the working day, they must do the following. They must make it possible for individuals to apply for and receive Food Stamp, AFDC, and Medi-Cal benefits, including emergency benefits, within the time limits prescribed by state and federal law. The CWDs must also provide notice of their hours of operation and of the procedures, during these hours of closure, for applying for and receiving these benefits, including emergency benefits.

These regulations implement the December 20, 1994 judgment as amended January 3, 1995.

HANDBOOK ENDS HERE

.2 Definitions

- .21 For purposes of these regulations, the following apply:
 - .211 "Accept and act upon all applications for emergency benefits" includes providing such emergency benefits within the time limits prescribed by federal and state law.
 - .212 "Local telephone service" means a telephone number which is toll-free for the same geographic area as the regular telephone number for each CWD office.

- "Opportunity to file an application for benefits" includes the provision of special assistance under 7 CFR 273.2(e) and (f) (see Sections 63-300.4 and .5) and 45 CFR 233.10(a)(1)(vi) (see Section 40-157.213).
 - (a) "Special assistance" means assisting the applicant as necessary in order to provide emergency benefits within the time limits prescribed by federal and state law, including waiving the face-to-face office interview, conducting the application interview by telephone, and assisting the applicant in gathering needed documents.
- "Regular eight hours of a working day" means the eight-hour period the CWD's offices are open to the public. If the CWD office is never open eight hours on a working day, the "regular eight hours of the working day" shall mean the hours that the CWD office is open, plus an additional time period(s) immediately before, after, or between these hours, which cumulatively equal eight hours.
- .215 "Working days" means Mondays, Tuesdays, Wednesdays, Thursdays, and Fridays, excluding federal and state holidays.

.3 County Responsibilities

...

- .31 If a CWD closes its offices at any time during the regular eight hours of a working day, the CWD shall do all of the following during those hours of office closure:
 - .311 Provide individuals the opportunity to file an application for and receive Food Stamp and/or AFDC benefits within the time limits prescribed by federal and state law.
 - (a) Make applications for such benefits readily available to individuals.
 - (b) Provide a drop-box, mail slot, or other reasonable means for filing applications.
 - (1) Applications deposited as described in Section 11-600.311(b) shall be deemed to have been filed on the date of the CWD office closure.
 - (2) In the event an individual certifies he/she was denied the opportunity to file an application, and the CWD does not have evidence to the contrary, the application shall be processed in all respects as though it was filed on the date of the CWD office closure.
 - .312 Provide individuals the opportunity to file an application for and receive expedited Food Stamp, immediate need AFDC, and/or homeless assistance benefits within the time limits prescribed by federal and state law.

- (a) Maintain sufficient staff to accept and act upon all such applications, and/or
- (b) Maintain a local telephone service with sufficient staff to accept and act upon all such applications as if such requests had been made in person at the CWD's office.
- .313 Greet incoming calls on the main telephone lines of the CWD's offices with an announcement informing the caller of following:
 - (a) The working days, or regular eight hours of a working day, when the offices will be closed;
 - (b) The procedures for obtaining and filing applications for Food Stamp and AFDC benefits, during these hours of office closure; and
 - (c) The procedures for applying for and receiving expedited Food Stamp, immediate need AFDC, and homeless assistance benefits, within the time limits prescribed by federal and state law, during these hours of office closure.

HANDBOOK BEGINS HERE

(d) CDSS and the Department of Health Services are enjoined by court order in the Blanco v. Anderson lawsuit. The court order includes provisions for providing services to clients under Medi-Cal as well as Food Stamp and AFDC programs. The order requires that telephone announcements greeting incoming calls informing the public of the provisions specified in Sections 11-601.313(a), (b), and (c) include information regarding Medi-Cal and emergency medical services.

HANDBOOK ENDS HERE

- Post notices in prominent locations within the CWD's offices and in the public areas, including the doors, immediately outside the CWD's offices which inform the public of the following:
 - (a) The working days, or the regular eight hours of a working day, when the offices will be closed;
 - (b) The procedures for obtaining and filing applications for Food Stamp and AFDC benefits during these hours of office closure; and
 - The procedures for applying for and receiving expedited Food Stamp, immediate need AFDC, and homeless assistance benefits within the time limits prescribed by federal and state law, during these hours of office closure.

HANDBOOK BEGINS HERE

court order in the Blanco v. Anderson lawsuit. The court order includes provisions for providing services to clients under Medi-Cal as well as Food Stamp and AFDC programs. The order requires that notices posted by the CWD offices informing the public of the provisions specified in Sections 11-601.314(a), (b), and (c) include information regarding Medi-Cal and emergency medical services.

HANDBOOK ENDS HERE

Authority Cited: Sections 10553, 10554, and 18904, Welfare and Institutions Code.

Reference:

Section 18902, Welfare and Institutions Code; Blanco v. Anderson Court Order, United States District Court, Eastern District of California, No. CIV-S-93-859 WBS, JFM, dated January 3, 1995.

Amend Section 44-317.111 to read:

44-317 BEGINNING DATE OF AID FOR NEW APPLICATIONS

44-317

When the applicant is found eligible, the following are beginning dates of aid:

- .1 Basic Date of Aid Determination
 - .11 (Continued)

.111 (Continued)

- In the event the CWD is closed during the regular eight hours of a working day as defined in Sections 11-601.214 and .215, and an application for AFDC benefits is deposited in a drop box, mail slot, or other reasonable accommodation in accordance with Section 11-601.311(b), the "date of application" shall be the date the application is deposited.
- (b) In the event the CWD is closed during the regular eight hours of a working day as defined in Sections 11-601.214 and .215, and an applicant calls to make a request for emergency benefits in accordance with Section 11-601.313, the date of application shall be the date the telephone call is received.

HANDBOOK BEGINS HERE

Example: On Friday, when the CWD is closed, an applicant deposits an application for AFDC benefits in a mail slot designated for that purpose. The application will be date stamped with Friday's date or it will be otherwise indicated on the application that it was received on Friday, the date of application. Had the applicant made a request for Homeless Assistance, Food Stamp Expedited Services, Medi-Cal, or AFDC Immediate Need via the local telephone service on Friday, the date of application would be Friday and the application would have to be processed within established time frames.

HANDBOOK ENDS HERE

Authority Cited: Sections 10553, 10554, 10604, and 11209, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 10604, and 11056, Welfare and Institutions Code; 45 CFR 206.10; 45 CFR 233.10(a)(1); 45 CFR 233.20(a)(1)(ii); 45 CFR 233.60; 45 CFR 233.90(c)(2)(i); #Md Section 3510 (October 1961), Federal Handbook of Public Assistance Administration; and Blanco v. Anderson Court Order, United States District Court, Eastern District of California, No. CIV-S-93-859 WBS, JFM, dated January 3, 1995.

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STATE OF CALIFORNIA-OFFICE OF A MIS	FEGULATIONS S	UBMISSION	(See instructions on reverse)	For use by Secretary of State only
STD. 400 (REV. 2-91) AGENCY			AGENCY FILE NUMBER (If any)	
	DEMENT OF COCTAI	CEDUTCEC		
NOTICE ELLE NUMBER	RTMENT OF SOCIAL		1294-42	
OAL FILE NOTICE FILE NUMBER NUMBERS	95-0512-050	EMERGENCY NUMBER	95-0120-63E	
	or use by Office of Administra	tivo Law (OAL) only	12-0120-030	FILED
	in use by Office of Authinistra		1995 MAY 12 FR 10: 0	In the office of the Secretary of State of the State of California
			ADMINISTRATION	JUN 1 4 1995
			APPROVED FOR	ILING 4:29 O'clock ON
			JUN 1 4 19	Denvily Special of State Denvily State
NOTICE		REGU	ULATIONS	and the second s
A. PUBLICATION OF NOTIC	CE (Complete for publ	lication in Notice Red	gister) Office of Adminis	rative Law
1. TOPIC OF NOTICE GAIN-UWEX Regulations		TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE Notice re Proposed Regulatory Action	Other	4. AGENCY CONTACT PERS	SON	TELEPHONE NUMBER
OAL USE ACTION ON PROPOSED NO Approved as Submitted		Disapproved/ Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE
B. SUBMISSION OF REGUI	_ATIONS (Complete v	vhen submitting regu	ulations)	
				1)
1. SPECIFY CALIFORNIA CODE OF	ADOPT	AND SECTION(S) (Inclu	iding title 26, if toxics-related	2)
MPP		75.35, .44 and	. 524	
	AMEND			
SECTIONS AFFECTED	Sections 42-71	10.3, 42-720.583	1, 42-730.274 and	42-741
2. TYPE OF FILING				
Regular Rulemaking (Gov. Code, § 11346)	Resubmittal	Changes Without (Cal. Code Regs.,	title 1, § 100)	Emergency (Gov. Code, § 11346.1(b))
Certificate of Compliance: The a prior to, or within 120 days of, the			emplied with the provisions of 0	Government Code §§ 11346.4 - 11346.8
Print Only	Other (specify)			
3. DATE(S) OF AVAILABILITY OF MODIFIED R	EGULATIONS AND/OR MATERIAL A	DDED TO THE RULEMAKING FI	ILE (Cal. Code Regs. title I, §§ 44 and	d 45)
4. EFFECTIVE DATE OF REGULATORY CHAN				
Effective 30th day after filling with Secretary of State	X Effective on filing with Secretary of State	Effective other (Specify)		
5. CHECK IF THESE REGULATIONS REQUIRE Department of Finance (Form ST		Fair Political Pract		State Fire Marshal
Other (Specify)				
6. CONTACT PERSON	Vitualii Office of	- Populations De	ovolonmont	TELEPHONE NUMBER 65 7 -2586
7.	itulli, Office of	. regulations De	e ve to bijent	UJ#-2300
I certify that the attached form, that the information action, or a designee of t	specified on this form	is true and correct,	and that I am the head o	f the agency taking this
SIGNATURE OF AGENCY HEAD OR DESIGNE	7			DATE
TYPED NAME AND TITLE OF SIGNATORY (ELOISE ANDERSON, Din	rector			5/10/45
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NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD, 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

RESUBMITTAL OF DISAPPROVED OR WITHDRAWN REGULATIONS

When resubmitting previously disapproved or withdrawn regulations to OAL for review, use a new STD. 400 and fill out Part B, including the signed certification. Enter the number of the previously disapproved or withdrawn filing in the box marked

"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

42-710 INTRODUCTION TO GAIN

- .3 Definitions for Terms Used in This Chapter
 - (a) through (x) (Continued)
 - (y) "UWEX" means AFDC Unemployed Parent Work Experience component.
 - (z) "Volunteer" means an AFDC applicant or recipient who, though exempt from registration, voluntarily participates in GAIN.

Authority Cited: Sections 10553 and 10504, Welfare and Institutions Code.

Reference:

Sections 11320, 11320.2, 11320.4, 11320.6, 11320.8, 11321, 11321.2, 11321.4, 11321.6, 11321.8, 11322, 11322.2, 11322.4, 11322.6, 11322.8, 11323, 11323.1, 11323.15, 11323.2, 11323.4,11323.6, 11323.8, 11324, 11324.2, 11324.4, 11324.6, 11324.8, 11325, 11325.2, 11325.4, 11325.6, 11326, 11326.2, 11326.4, 11326.6, 11326.8, 11327, 11327.2, 11327.4, 11327.5, 11327.6, 11327.8, 11328, 11328.1, 11328.2, 11328.4, 11328.6, 11328.8, 11329, 11329.2, 11329.4, 11329.5, and 13280, Welfare and Institutions Code; 45 CFR 250.63(k); 42 U.S.C. 682(d)(1)(A)(ii)(IV).

Amend Section 42-720.581 to read:

42-720 THE GAIN COUNTY PLAN (Continued)

- .5 (Continued)
 - .58 A plan will be approved only if it provides an adequate range of services.
 - .581 For large counties, as defined by DSS for AFDC cost control purposes, "an adequate range of services" means that the CWDs shall provide all of the job services, education, training, and supportive services described in Sections 42-730, 42-750 and 42-775.35, except as provided in Section 42-730.61.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 11320.6(b), 11320.8(c), 11321, 11321.2, 11321.2(a), 11321.2(b), 11322.2(b), 11322.4, 11322.8, 11323.15, 11330.5(d), 11330.8(c), 11330.9, and 13280, Welfare and Institutions Code; 45 CFR 250.1; 45 CFR 250.11; 45 CFR 250.12(c); 45 CFR 250.31(a); 45 CFR 250.44; 45 CFR 250.45; and 45 CFR 250.63(k).

42-730

- .2 Job Services shall include: (Continued)
 - .27 Subject to the GAIN Program participant flow process as described in Sections 42-771 through 774, participation in job search activity shall be limited as follows: (Continued)
 - .274 Counties shall not require any individual to participate in job search activity in excess of the limits specified in Sections 42-730.271 and .272 except as part of a CWD approved education, training or employment activity as follows:
 - (a) During a PREP or UWEX assignment; or (Continued)
- .3 Training services shall include: (Continued)
 - .32 Preemployment Preparation (PREP) (Continued)
 - .323 The number of hours a person participates in a PREP assignment shall be determined by the appropriate formula provided in Section 42-730.323 (a) or (b): (Continued)

Authority Cited: Sections 10553, 10554 and 10604, Welfare and Institutions Code

Reference: Sections 11322.6(f), 11322.6(f)(2), 11322.8(h)(6), 11323, 11323.15, 11324.2(a)(2), 11324.4(b), 11324.6, and 11330.7, Welfare and Institutions Code: 45 CFR 250.60(c) and (d); 45 CFR 250.62(b)(2); 45 CFR 251.3(a); and 45 CFR 250.63(k).

42-741 AGREEMENTS FOR PREP AND UWEX

- 42-741
- .1 Agreements between the CWD and providers of PREP or UWEX shall include the specific performance criteria in Section 42-740.1 and PREP shall be consistent with Section 42-730.32.
- .2 An agreement between the CWD and the employer of a participant in the UWEX component shall be consistent with the provisions of Section 42-775.35.
 - .21 At a minimum, the terms of the agreement shall include a brief description of the participant's position or duties, the assigned hours, and the method for verifying attendance.
 - .22 The agreement must be in writing, but an informal format, such as a form letter that is returned to the county after signature by the employer or the employer's representative, may be used.
 - .23 Employers shall conduct at a minimum an evaluation of the participant's progress at least quarterly or at midpoint for training assignments of three months or less and at the completion of the program. Participants shall provide the employer evaluation(s) to the county.
- .3 The CWD shall ensure that the sponsor of a PREP or UWEX assignment shall assist and encourage a qualified PREP or UWEX participant to compete for job openings occurring within the sponsor's organization.

HANDBOOK BEGINS HERE

.4 Agreements are binding contracts even though they do not involve the exchange of money.

HANDBOOK ENDS HERE

Authority Cited: Sections 10553, 10554, and 10604, Welfare and Institutions Code.

Reference: Section 11322.8 and 11328.6, Welfare and Institutions Code; 45 CFR 250.63(k); 42 U.S.C. 682(d)(1)(A)(ii)(IV).

Adopt Sections 42-775.35, .44, and .524 to read:

42-775 GAIN PARTICIPATION REQUIREMENTS FOR AFDC-U PARENTS (Continued) 42-775

- .3 Upon completion of appraisal or assessment, as appropriate, the parent shall be required to participate in at least one of the following employment activities for at least 16 hours per week:
 - .31 through .34 (Continued)
 - .35 A UWEX component as described in this section.
 - .351 UWEX shall be a nonsalaried work experience assignment with a public, private non-profit, or at county option, a private forprofit employer, that shall enhance and renew job skills, build work habits or expedite the transition to unsubsidized employment.
 - (a) UWEX assignments may include activities that provide a needed community service.

HANDBOOK BEGINS HERE

- (1) Examples of appropriate UWEX community service assignments include, but are not limited to:
 - (A) nonsalaried work experience hours in a preschool, or an elementary or secondary school;
 - (B) nonsalaried work experience hours in a hospital, convalescent home or hospice program;
 - (C) nonsalaried work experience hours in public libraries; and,
 - (D) nonsalaried work experience hours in park and recreation districts.

HANDBOOK ENDS HERE

- .352 A UWEX assignment with a private for-profit employer shall not exceed 13 weeks except that a county may extend an assignment a maximum of 13 additional weeks based upon the case manager's determination of the participant's need for additional job/work exposure and/or training.
- .353 An assignment to UWEX shall be reviewed by the county at least annually to ensure that it continues to conform to the employment goal and to provide skills that will lead to unsubsidized employment.

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- .354 The number of hours a participant shall participate in a UWEX assignment shall be based on the employer's need, but shall not exceed 32 hours per week.
- .355 Participants assigned to UWEX shall be expected to continue to seek employment.
 - (a) A participant may request job services, as described in Section 42-730.2, at any time during participation in the UWEX assignment.
 - (b) Hours of participation in job service activities shall not exceed the hours of participation in the UWEX activity.
 - (c) Job search activities during the UWEX assignment shall not be subject to the 40-day time limit specified in Section 42-730.272.
- .356 A UWEX participant assigned to public agencies shall be allowed to:
 - (a) Participate in classified service examinations equivalent to the position he/she occupies.
 - (b) Participate in all open and promotional examinations for which experience in the position or other relevant experience is qualifying under merit system rules.
- .357 A UWEX assignment shall not be created as a result of, or shall not result in, any of the conditions described in Section 42-730.329.
- .4 Notwithstanding any other provisions of these regulations, concurrent participation in an employment activity listed in Section 42-775.3 and any other program activity may be required as needed to meet the participant's employment goal. (Continued)
 - .44 Combined hours of participation in all assigned activities, including independent job search as required by Section 42-775.355, shall not exceed 40 hours per week.
- .5 For parents under age 25 who do not possess a high school diploma or equivalent, participation in education activities as described in Section 42-730.5 may be required in lieu of the activities specified in Section 42-775.3. (Continued)
 - .52 Notwithstanding any other provision of these regulations, concurrent participation in an educational activity pursuant to Section 42-775.5 and an employment activity described in Section 42-775.3 and other program activity may be required. (Continued)

.524 Combined hours of participation in all assigned activities, including independent job search as required by Section 42-775.355, shall not exceed 40 hours per week.

Authority Cited: Sections 10553, 10554, and 10604, Welfare and Institutions Code.

Reference:

Sections 11320.8(a), 11322.4 (f), 11322.6(f)(2), 11322.8, 11322.8(f) and (g), 11323.15, 11324.6, 11325, 11325.2(c) (7) and (c) (9), 11325.8(b), 11326, 11326.8, and 11327.4(a), Welfare and Institutions Code; 45 CFR 250.20(e)(2)(ii); 45 CFR 250.21(d)(5); 45 CFR 250.33, 45 CFR 250.41; 45 CFR 250.60(d); 45 CFR 250.63(k); 45 CFR 250.63(k)(1); and 45 CFR 250.74(c)(1); 45 CFR 251.3; 42 U.S.C. 603(1)(4)(A) and (B)(i); 42 U.S.C. 682(d)(1)(A)(ii)(IV); 42 U.S.C. 684(c)(1), (2) and (3); and JOBS-ACF-AT-93-7.

	SUBMISSION	(See instructions on reverse)	For use by Secretary of State on
NTD. 400 (REV. 2-91)		AGENCY FILE NUMBER (If any)	
California Department of Social	Services	0794-24	
CAL FILE NOTICE FILE NUMBER REGULATORY ACTION NUMBER	EMERGENCY NUMBER	PREVIOUS REGULATORY ACTION NUMBER	
NUMBERS Z-94-1220-03 95-0505-/00	94-1223-03E		
For use by Office of Administr	rative Law (OAL) only		FILED
	1995 MAY - 9	5 PH 3 20	In the office of the Secretary of State of the State of California
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NOTICE	REGUL	ATIONS	rediction formatorisms
		Office of Administra	tive Law
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CCWRO v. Anderson	4. AGENCY CONTACT PERSO	N	TELEPHONE NUMBER
Notice re Proposed Regulatory Action Other			
OAL USE ACTION ON PROPOSED NOTICE Approved as Approved as		NOTICE REGISTER NUMBER	PUBLICATION DATE
ONLY Submitted Modified	Disapproved/ Withdrawn	11/11/24	1200-14
3. SUBMISSION OF REGULATIONS (Complete	when submitting regula	ations)	
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ITI E (0)	AND SECTION(S) (Include	ing title 20, it toxics-related	/
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MPP 50-025 E AMEND SECTIONS	et seq.		
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NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

RESUBMITTAL OF DISAPPROVED OR WITHDRAWN REGULATIONS

When resubmitting previously disapproved or withdrawn regulations to OAL for review, use a new STD. 400 and fill out Part B, including the signed certification. Enter the number of the previously disapproved or withdrawn filing in the box marked

"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

Adopt Section 50-025, amend Section 50-025.412(b), and modify Handbook Section 50-025.655 to read:

50-025 CCWRO V. ANDERSON RETROACTIVE LAWSUIT

50-025

HANDBOOK BEGINS HERE

.1 Background.

On February 6, 1990, the <u>Coalition of California Welfare Rights Organizations</u> (CCWRO) v. <u>Anderson</u> lawsuit was filed with the Sacramento County Superior Court, challenging the California Department of Social Services' (CDSS) notice procedures for noncompliant Greater Avenues for Independence (GAIN) participants. Prior to October 1, 1990, GAIN regulations required counties to send a GAIN Appointment Notice to a noncompliant participant for cause determination. If the participant failed to respond to the notice, the case would go through the conciliation process without further notice to the participant prior to the imposition of sanctions.

On September 12, 1991, the Superior Court granted CDSS summary judgment, finding that the applicable GAIN regulations provided participants with adequate notice and a reasonable opportunity to appear. On January 4, 1993, the Court of Appeal ruled in favor of an appeal by CCWRO and reversed the decision of the Superior Court. The case was remanded to Superior Court for further proceedings.

On March 8, 1994, the Superior Court entered Judgment on the case as directed by the Court of Appeal. The <u>CCWRO</u> Judgment ruled that the procedure of imposing a conciliation plan and subsequent sanction without further notice to a participant who failed to respond to a GAIN Appointment Notice was not promulgated as a rule in accordance with the Administrative Procedures Act, Government Code Sections 11346-11347.5.

In addition to the counties that did not send additional notices to participants prior to imposing a conciliation plan and subsequent sanction, the Court also included in the Judgment those counties that sent an additional notice prior to conciliation. The Court ruled that the additional notice procedure used by these counties was invalid because it was not promulgated as a regulation in accordance with the Administrative Procedures Act.

The Judgment specifies that all mandatory GAIN participants who were mailed a GAIN Appointment Notice during the retroactive period, who failed to respond to the appointment notice, or an additional notice from the county, and whose Aid to Families with Dependent Children (AFDC) benefits were reduced solely as a result of their failure to participate in the GAIN Program for the reasons specified in the Appointment Notice are class members eligible for corrective underpayment.

HANDBOOK ENDS HERE

.2 Definitions.

For the purpose of these regulations:

a.-b. Reserved.

- c. (1) "Claim period" means the period from January 15, 1995 through April 14, 1995 during which a potential class member may file a claim under CCWRO v. Anderson.
 - "Class member" means all mandatory GAIN participants who were mailed a GAIN Appointment Notice from July 1, 1985 through September 30, 1990, who failed to respond to the Appointment Notice, or an additional notice from the county, and who were sanctioned solely as a result of their failure to participate in the GAIN Program for the reasons specified in the appointment notice.
 - (3) "Corrective underpayment" means the retroactive payment of cash aid inappropriately withheld from a class member.
 - (4) "CWD" means county welfare department.

d.-e. Reserved.

- f. (1) "Five standard languages" means Spanish, Vietnamese, Laotian, Chinese and Cambodian.
 - (2) "Four standard Asian languages" means Vietnamese, Laotian, Chinese and Cambodian.
- g. (1) "GEN 1172 (5/93) Court Case: <u>CCWRO</u> v. <u>Anderson</u>" (Court Case Statistical Report) means the form used by CWDs to report statistical data regarding the claims filed and paid under this lawsuit.

h.-m. Reserved.

n. (1) "NOA" means a notice of action that is considered to be adequate within the meaning of Manual of Policies and Procedures (MPP) Section 22-021.

o.-a. Reserved.

- r. (1) "Responsible CWD" means the county welfare department GAIN office that took an action on which a class member's claim is based.
 - (2) "Retroactive period" means the period from July 1, 1985 through September 30, 1990.

s. Reserved.

- t. (1) "TEMP GAIN 86 (11/94), Informing Notice" means the document mailed by the CWD to inform potential claimants of possible corrective underpayments resulting from the CCWRO Court Order.
 - (2) "TEMP GAIN 87 (1/95), Claim Form" means the document used by claimants to file a claim based on the CCWRO Court Order.
 - (3) "TEMP GAIN 89 (11/94), Informing Poster" means the document that is posted to notify potential claimants of possible corrective underpayments resulting from the CCWRO Court Order.

u.-z. Reserved.

.3 Informing Class Members.

HANDBOOK BEGINS HERE

- .31 CDSS Responsibilities. CDSS shall:
 - .311 Print the TEMP GAIN 89 (Informing Poster) in English with bullets in the five standard languages.
 - .312 Provide CWDs with:
 - (a) A reproducible copy of the TEMP GAIN 86 (Informing Notice) in English with bullets in the five standard languages.
 - (b) Reproducible copies of the TEMP GAIN 87 (Claim Form) in English and the five standard languages.
 - (c) Copies of NOA messages in English and reproducible copies of NOA forms in English and the five standard languages.
 - (d) Reproducible copies of the TEMP GAIN 89 (Informing Poster) with bullets in the five standard languages.
 - .313 Mail copies of the TEMP GAIN 89 (Informing Poster) to legal aid and welfare rights organizations of plaintiffs' choice at least 10 days before the beginning of the claim period.
 - (a) Plaintiffs' counsel shall provide CDSS with the mailing labels not to exceed 300.

HANDBOOK ENDS HERE

- .32 Included CWDs.
 - .321 The following CWDs are identified as included CWDs. These CWDs shall fully implement the provisions of the Judgment:
 - (a) Alpine, Alameda, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Imperial, Inyo, Kern, Kings, Lake, Lassen, Los Angeles, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Orange, Placer, Plumas, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Shasta, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tulare, Ventura, Yolo, and Yuba.
 - .322 The following CWDs are not required to fully implement the notification and claim processing provisions of the Judgment.
 - (a) San Francisco, Santa Cruz, Sierra, and Tuolumne.
 - (b) If these excluded CWDs receive a TEMP GAIN 87 (Claim Form), they shall issue the M50-025D (Deny Claim) and forward the claim to the responsible CWD, if known.
- .33 CWD Responsibilities. Included CWDs shall:
 - .331 Reproduce an adequate supply of the TEMP GAIN 86 (Informing Notice) in English with bullets in the five standard languages.
 - (a) On the TEMP GAIN 86 (Informing Notice), CWDs shall specify the county office address and phone number that potential claimants are to contact or call to obtain a TEMP GAIN 87 (Claim Form).
 - .332 Notify potential class members using one of the following methods:
 - (a) CWDs with the computer systems capability to identify GAIN participants who are potential class members shall conduct a computerized search and mail a TEMP GAIN 86 (Informing Notice) to each potential class member by January 5, 1995.
 - (1) CWDs shall maintain a record of all potential class members to whom notices were mailed.
 - (b) CWDs that do not have the capability to conduct a computerized search may choose to perform a manual case file search to identify GAIN participants who are potential class members and mail a TEMP GAIN 86 (Informing Notice) to each potential class member by January 5, 1995.
 - (1) CWDs shall maintain a record of all potential class members to whom notices were mailed.

- (c) CWDs that do not have the capability to conduct a computerized search and who choose not to conduct a manual search shall send a TEMP GAIN 86 (Informing Notice) to all current AFDC recipients, via a CA 7 stuffer, by January 5, 1995.
- .333 Place TEMP GAIN 89 (Informing Poster) in conspicuous locations in all welfare offices, GAIN offices and Food Stamp issuance offices the first day of the claim period.
 - (a) The TEMP GAIN 89 (Informing Poster) shall be displayed from January 15, 1995 until close of business April 14, 1995.
 - (b) On the TEMP GAIN 89 (Informing Poster), CWDs shall specify the county office address and telephone number that potential claimants are to contact or call to obtain a TEMP GAIN 87 (Claim Form).
- .334 Reproduce an adequate supply of the TEMP GAIN 87 (Claim Form) in English and the five standard languages.
- .335 Mail a TEMP GAIN 87 (Claim Form) within five working days following a request by anyone who calls the phone number specified on the TEMP GAIN 86 (Informing Notice) and TEMP GAIN 89 (Informing Poster).
- .336 Give a TEMP GAIN 87 (Claim Form), immediately upon request during normal business hours, to anyone who goes to the office specified on the TEMP GAIN 86 (Informing Notice) and TEMP GAIN 89 (Informing Poster) and requests a claim form.
 - (a) CWDs shall maintain an adequate supply of the TEMP GAIN 87 (Claim Form) on hand for distribution to potential claimants.
- .337 CWDs shall specify on the TEMP GAIN 87 (Claim Form) the address where claimants are to return the completed claim form.
- .4 Application for Corrective Underpayment.
 - .41 Claimants' Responsibilities. Claimants shall:
 - .411 Complete and sign under the penalty of perjury a TEMP GAIN 87 (Claim Form).
 - .412 Submit the TEMP GAIN 87 (Claim Form) on or before the end of the claim period to the responsible CWD.
 - (a) If mailed, the postmark must be no later than April 14, 1995.

- (b) During the claim period, claimants shall be permitted to resubmit a claim that was previously denied due to being incomplete when the claimant did not submit the necessary information within 30 days, as specified in Section 50-025.541.
- .413 Submit a completed TEMP GAIN 87 (Claim Form) to each responsible CWD, if there was more than one responsible CWD.
- .414 Provide necessary additional information, documentation or clarification upon request from a CWD.
- .42 CWDs' Responsibilities. CWDs shall:
 - .421 Stamp the TEMP GAIN 87 (Claim Form) with the date received by the CWD.
 - (a) If the date of receipt cannot be determined by a date stamp, the date of receipt shall be the date the claimant signed the TEMP GAIN 87 (Claim Form).
 - .422 Notwithstanding the date specified in Section 50-025.421, process all claim forms postmarked on or before April 14, 1995.
 - (a) If the TEMP GAIN 87 (Claim Form) is postmarked after April 14, 1995, issue NOA M50-025D (Deny Claim) within 30 days following receipt of the claim.
 - (b) The CWD shall retain envelopes postmarked after April 14, 1995.
 - .423 Retain all records which contain documents relevant to the <u>CCWRO</u> lawsuit for three years from the date CDSS submits the last expenditure report for federal reimbursement.
 - (a) Documents included are those used to determine eligibility for the class (including denials) and those used to determine the amount of corrective underpayments; including case records, payment records, assistance claims, reimbursement claims, claim verification and any other documents related to this lawsuit.
 - .424 Determine the Responsible CWD.
 - (a) If the CWD receiving the TEMP GAIN 87 (Claim Form) determines that it is the responsible CWD, the CWD shall process the claim form in accordance with Section 50-025.5.
 - (1) "Responsible CWD" is defined in Section 50-025.2r.(1).

- (b) If the CWD receiving the TEMP GAIN 87 (Claim Form) determines that it is not the responsible CWD, the receiving CWD shall issue NOA M50-025D (Deny Claim) and forward the TEMP GAIN 87 (Claim Form) to the responsible CWD within 30 days from the date the claim was received.
 - (1) The receiving CWD shall inform the claimant on NOA M50-025D (Deny Claim) that the TEMP GAIN 87 (Claim Form) has been forwarded to the responsible CWD for processing.
 - (2) The responsible CWD shall process the claim form in accordance with Section 50-025.5.
 - (A) Notwithstanding Section 50-025.422, responsible CWDs shall process all claims that are forwarded from a receiving CWD, regardless of whether the responsible CWD receives the claim from the receiving CWD by the end of the claim period.
 - (3) If the responsible CWD cannot be determined, the receiving CWD shall issue NOA M50-025D (Deny Claim) within 30 days following receipt of the claim.
 - (A) The CWD shall indicate on the NOA that the claimant must file his/her claim with the responsible CWD.

.5 Processing Claim Forms.

- .51 The responsible CWD shall review each TEMP GAIN 87 (Claim Form) for completeness. The TEMP GAIN 87 (Claim Form) shall be considered complete when the following information is given:
 - .511 Answers to the qualifying class member questions on the TEMP GAIN 87 (Claim Form).
 - .512 Claimant's case name(s) used during retroactive period.
 - .513 Claimant's date of birth.

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- .514 Claimant's social security number.
- .515 Claimant's current mailing address.
- .516 County or counties of residence during retroactive period.
- .517 Claimant's signature.

- .518 The following information shall be provided by the claimant on the TEMP GAIN 87 (Claim Form) to the extent possible:
 - (a) The AFDC or GAIN case number.
 - (b) Phone number.
 - (c) Date(s) for which the claim is being filed.
- .52 If the claim is complete, as specified in Section 50-025.51, and the claimant meets the definition of class member specified in Section 50-025.2(c)(2), the responsible CWD shall complete processing the claim within 90 days after receipt of the claim.
 - .521 If the information on the claim form and in the case file is sufficient, the CWD shall calculate the corrective underpayment, in accordance with Section 50-025.6, and issue a check with NOA M50-025A (Approve Claim) within 45 days after the date payment is authorized.
 - (a) CWDs shall indicate on the NOA when the check will be issued if unable to issue the check for the corrective underpayment with the NOA.
 - .522 In the absence of evidence to the contrary, the CWD shall accept self-certification from the claimant, signed under the penalty of perjury, to satisfy documentary requirements in the event such documentation is not available.
 - .523 The CWD shall verify documentation whenever authenticity is in doubt.
- .53 If the claimant is NOT a class member, the CWD shall issue NOA M50-025D (Deny Claim) within 90 days after the claim was received.
 - .531 The CWD shall preprint the GAIN 50 (6/92) Your GAIN Hearing Rights to the back of the NOA or attach a copy of the GAIN 50 to the NOA.
- .54 If additional information is needed, the CWD shall issue NOA M50-025B (Request Claim Information) within 30 days after receipt of the claim.
 - .541 The CWD shall indicate on the NOA that claimants have 30 days from the date of the NOA to respond to the request for additional information.
 - .542 The CWD shall complete processing a claim within 90 days after receiving the additional information.
 - .543 If the claimant meets the definition of a class member specified in Section 50-025.2c.(2), the CWD shall issue the corrective underpayment in accordance with the procedures specified in Section 50-025.521.

- .544 The CWD shall issue NOA M50-025D (Deny Claim) if the information does not establish the claimant as a class member.
- .545 The CWD shall issue NOA M50-025D (Deny Claim) if the claimant does not respond within the time specified in Section 50-025.541
- .55 For the purpose of determining continued eligibility and the amount of assistance for the AFDC Program, CWDs shall not consider a corrective underpayment as income or as a resource in the month paid or in the following month.
- .56 For the Food Stamp Program, a retroactive corrective underpayment shall be excluded as income for all Food Stamp households and excluded as a resource for categorically eligible Food Stamp households as long as they remain eligible for AFDC.
- .6 Computation of Corrective Underpayments.
 - .61 There is no minimum amount a class member may receive as a corrective underpayment.
 - .62 The claimant shall not be entitled to corrective underpayment for any portion of the sanction amount which was previously repaid under another lawsuit.
 - .63 CWDs shall determine the length of the sanction period for which a class member, as defined in Section 50-025.2(c)(2), shall be entitled to recover withheld cash aid.
 - .631 For sanctions applied before July 1, 1989, CWDs shall consider the end of the sanction period for which a class member shall be entitled to recover cash aid to be:
 - (a) For a first financial sanction, the end of the three-month sanction period.
 - (b) For a second or subsequent financial sanction, the end of the six-month sanction period.
 - .632 For sanctions applied on or after July 1, 1989, CWDs shall consider the end of the sanction period for which a class member shall be entitled to recover cash aid to be:
 - (a) For a sanction resulting from a first instance of noncompliance without good cause, the date the sanction was cured, as specified in Section 42-786.22, or the end of the month following application of the sanction, whichever comes first.
 - (b) For a sanction resulting from a second instance of noncompliance without good cause, the end of the three-month sanction period specified in Section 42-786.23.

- (c) For a sanction resulting from a third or subsequent instance of noncompliance without good cause, the end of the six-month sanction period specified in Section 42-786.24.
- .64 CWDs shall balance the corrective underpayment against an outstanding overpayment as follows:
 - .641 The corrective underpayment shall be balanced with an AFDC overpayment as specified in Section 44-340.42.
 - .642 The CWDs shall attempt to obtain a written agreement of the class member to balance a GAIN supportive services overpayment with the corrective underpayment.
 - (a) If the class member does not agree to balance the corrective underpayment with his/her GAIN supportive services overpayment, the CWD shall issue the corrective underpayment to the class member in full.
- .65 CWDs shall pay interest to those class members who are no longer on AFDC at the time of payment. To pay interest, CWDs shall:
 - .651 Begin interest in the month subsequent to the end of the sanction period, as determined in Section 50-025.63.
 - .652 Determine the month in which the payment is authorized.
 - .653 To determine the appropriate interest amount and corrective underpayment:
 - (a) Determine the Initial Interest Month (the month following the end of the sanction period);
 - (b) Determine the Payment Authorization Month (the month the corrective underpayment will be authorized);
 - (c) Determine the interest percentage factor on the "Interest Chart for CCWRO Corrective Underpayment" where the dates from (a) and (b) meet;
 - (d) Multiply the amount of cash aid withheld during the sanction period by the interest percentage factor; and
 - (e) Add the cash aid withheld to the interest to be paid to determine the corrective underpayment.

HANDBOOK BEGINS HERE

.654 EXAMPLE: A CWD determines that a class member who is no longer on aid was sanctioned from September 1, 1987 to November 30, 1987 at \$200.00 per month. Total cash aid withheld was \$600.00.

To Calculate the Corrective Underpayment:

- (a) Initial Interest Month December 1987(b) Payment Month- January 1995

	Total Cash Aid Withheld	\$600.00
(c) (d)	Interest Percentage Factor Interest To Be Paid	X .5266 <u>+\$315.96</u>
(e)	Corrective Underpayment	\$915.96

.655 Interest Chart for <u>CCWRO</u> Corrective Underpayments

Initial Interest	Payment Authorization Month					
Month	Jan-95	<u>Feb-95</u>	<u>Mar-95</u>	<u> Apr-95</u>	<u>May-95</u>	<u>Jun-95</u>
Jul-85	.6958	.7042	.7125	.7208	.7292	.7375
Aug-85	.6900	.6984	.7067	.7150	.7234	.7317
Sep-85	.6841	.6925	.7008	.7091	.7175	.7258
Oct-85	.6783	.6867	.6950	.7033	.7117	.7200
Nov-85	.6725	.6809	.6892	.6975	.7059	.7142
Dec-85	.6666	.6750	.6833	.6916	.7000	.7083
	<u>Jan-95</u>	Feb-95	<u>Mar-95</u>	<u> Apr-95</u>	<u>May-95</u>	<u>Jun-95</u>
Jan-86	.6608	.6692	.6775	.6858	.6942	.7025
Feb-86	.6550	.6634	.6717	.6800	.6884	.6967
Mar-86	.6491	.6575	.6658	.6741	.6825	.6908
Apr-86	.6433	.6517	.6600	.6683	.6767	.6850
May-86	.6375	.6459	.6542	.6625	.6709	.6792
Jun-86	.6316	.6400	.6483	.6566	.6650	.6733
Jul-86	.6258	.6342	.6425	.6508	.6592	.6675
Aug-86	.6200	.6284	.6367	.6450	.6534	.6617
Sep-86	.6141	.6225	.6308	.6391	.6475	.6558

	<u>Jan-95</u>	<u>Feb-95</u>	<u>Mar-95</u>	<u> Apr-95</u>	<u>May-95</u>	<u>Jun-95</u>
Oct-86	.6083	.6167	.6250	.6333	.6417	.6500
Nov-86	.6025	.6109	.6192	.6275	.6359	.6442
Dec-86	.5966	.6050	.6133	.6216	.6300	.6383
Jan-87	.5908	.5992	.6075	.6158	.6242	.6325
Feb-87	.5850	.5934	.6017	.6100	.6184	.6267
Mar-87	.5791	.5875	.5958	.6041	.6125	.6208
Apr-87	.5733	.5817	.5900	.5983	.6067	.6150
May-87	.5675	.5759	.5842	.5925	.6009	.6092
Jun-87	.5616	.5700	.5783	.5866	.5950	.6033
Jul-87	.5558	.5642	.5725	.5808	.5892	.5975
Aug-87	.5500	.5584	.5667	.5750	.5834	.5917
Sep-87	.5441	.5525	.5608	.5691	.5775	.5858
Oct-87	.5383	.5467	.5550	.5633	.5717	.5800
Nov-87	.5325	.5409	.5492	.5575	.5659	.5742
Dec-87	.5266	.5350	.5433	.5516	.5600	.5683
		:				
	<u>Jan-95</u>	<u>Feb-95</u>	<u>Mar-95</u>	<u> Apr-95</u>	<u>May-95</u>	<u>Jun-95</u>
Jan-88	.5208	.5292	.5375	.5458	.5542	.5625
Feb-88	.5150	.5234	.5317	.5400	.5484	.5567
Mar-88	.5091	.5175	.5258	.5341	.5425	.5508
Apr-88	.5033	.5117	.5200	.5283	.5367	.5450
May-88	.4975	.5059	.5142	.5225	.5309	.5392
Jun-88	.4916	.5000	.5083	.5166	.5250	.5333
Jul-88	.4858	.4942	.5025	.5108	.5192	.5275
Aug-88	.4800	.4884	.4967	.5050	.5134	.5217
Sep-88	.4741	.4825	.4908	.4991	.5075	.5158

	<u>Jan-95</u>	Feb-95	<u>Mar-95</u>	<u> Apr-95</u>	<u>May-95</u>	<u>Jun-95</u>
Oct-88	.4683	.4767	.4850	.4933	.5017	.5100
Nov-88	.4625	.4709	.4792	.4875	.4959	.5042
Dec-88	.4566	.4650	.4733	.4816	.4900	.4983
Jan-89	.4508	.4592	.4675	.4758	.4842	.4925
Feb-89	.4450	.4534	.4617	.4700	.4784	.4867
Mar-89	.4391	.4475	.4558	.4641	.4725	.4808
Apr-89	.4333	.4417	.4500	.4583	.4667	.4750
May-89	.4275	.4359	.4442	.4525	.4609	.4692
Jun-89	.4216	.4300	.4383	.4466	.4550	.4633
Jul-89	.4158	.4242	.4325	.4408	.4492	.4575
Aug-89	.4100	.4184	.4267	.4350	.4434	.4517
Sep-89	.4041	.4125	.4208	.4291	.4375	.4458
Oct-89	.3983	.4067	.4150	.4233	.4317	.4400
Nov-89	.3925	.4009	.4092	.4175	.4259	.4342
Dec-89	.3866	.3950	.4033	.4116	.4200	.4283
	Jan-95	<u>Feb-95</u>	<u>Mar-95</u>	<u>Apr-95</u>	<u>May-95</u>	<u>Jun-95</u>
Jan-90	.3808	.3892	.3975	.4058	.4142	.4225
Feb-90	.3750	.3834	.3917	.4000	.4084	.4167
Mar-90	.3691	.3775	.3858	.3941	.4025	.4108
Apr-90	.3633	.3717.	.3800	.3883	.3967	.4050
May-90	.3575	.3659	.3742	.3825	.3909	.3992
Jun-90	.3516	.3600	.3683	.3766	.3850	.3933
Jul-90	.3458	.3542	.3625	.3708	.3792	.3875
Aug-90	.3400	.3484	.3567	.3650	.3734	.3817
Sep-90	.3341	.3425	.3508	.3591	.3675	.3758

	<u>Jan-95</u>	<u>Feb-95</u>	<u>Mar-95</u>	<u> Apr-95</u>	<u>May-95</u>	<u>Jun-95</u>
Oct-90	.3283	.3367	.3450	.3533	.3617	.3700
Nov-90	.3225	.3309	.3392	.3475	.3559	.3642
Dec-90	.3166	.3250	.3333	.3416	.3500	.3583
Jan-91	.3108	.3192	.3275	.3358	.3442	.3525
Feb-91	.3050	.3134	.3217	.3300	.3384	.3467
Mar-91	.2991	.3075	.3158	.3241	.3325	.3408
Apr-91	.2933	.3017	.3100	.3183	.3267	.3350
May-91	.2875	.2959	.3042	.3125	.3209	.3292
Jun-91_	.2816	.2900	.2983	.3066	.3150	.3233

HANDBOOK ENDS HERE

.66 Class members shall not be entitled to more corrective underpayment than the amount of cash aid withheld during the sanction period, as specified in this section, plus interest, as determined in Section 50-025.65.

.7 Statistical Reports.

- .71 CWDs shall submit the GEN 1172 (5/93) Court Case: <u>CCWRO</u> v. <u>Anderson</u> no later than July 14, 1995 to the CDSS Statistical Services Bureau.
- .72 CWDs shall report on the disposition of all claims received during the claim period, from January 14, 1995 through April 14, 1995.
- .73 The report shall include:
 - .731 The total number of:
 - (a) TEMP GAIN 87s (Claim Form) mailed by CWD.
 - (b) TEMP GAIN 87s (Claim Form) handed out by CWD.
 - (c) TEMP GAIN 87s (Claim Form) received by CWD.
 - (d) Claims approved.
 - (e) Claims denied. CWDs shall include the number of claims denied for each of the following reasons:

- (1) Untimely. Includes claim forms received after claim period.
- (2) Not a class member.
- (3) Claim sent to wrong CWD and receiving CWD was not able to determine the responsible CWD to which the TEMP GAIN 87 (Claim Form) should be forwarded.
- (4) Claim sent to wrong CWD and receiving CWD forwarded to responsible CWD.
- (5) Incomplete. Includes claims that are not complete, as specified in Section 50-025.51, and there is no forwarding address to obtain the additional information needed; and incomplete claims for which additional information was requested but not received before the deadline specified on the notice.
- (6) Other.
- .732 Total amount of corrective underpayments paid (including interest).
- .733 Total amount of overpayments offset with corrective underpayments.

Reference: <u>CCWRO</u> v. <u>Anderson</u>, Sacramento County Superior Court, Case No. 512491.

STATE OF CALL ORNIA-OFFICE OF ADVINIS	TATIVE LAW	- 72-345	(See instructions on	For use by Secretary of State only
NOTICE PUBLICATION STD. 400 (REV. 2-91) AGENCY	REGULATIONS S	SUBMISSION	AGENCY FILE NUMBER (A any)	
California Department OALFILE NOTICEFILE NUMBER NUMBERS Z94-1220-03	of Social Servic	EMERGENCY NUMBER 95-0104-03E	RDB #0594-14 PREVIOUS REGULATORY ACTION NUMBER 94-1220-03E	in Reco
	or use by Office of Administra		71 1220 032	
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	P D	APPROVED AND PUB	PRSED FOR FILING	JUN 1 9 1995
NOTICE		144. raza	9 1995	AT 10NES, Secretary of State
A. PUBLICATION OF NOTI	CE (Complete for pub	lication in Notice Regi	ster)	10.1
i. TOPIC OF NOTICE AFDC-IPV Regulations	(0011),1010 101 101	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE Notice re Proposed Regulatory Action	Other	4. AGENCY CONTACT PERSO		TELEPHONE NUMBER
OAL USE ACTION ON PROPOSED N Approved as Submitted	OTICE Approved as Modified	Disapproved/ Withdrawn	NOTICE REGISTER NUMBER 94,450-2	12-30-94
B. SUBMISSION OF REGU	LATIONS (Complete	when submitting regula	ations)	
1. SPECIFY CALIFORNIA CODE O				1)
TITLE(S)	ADOPT			
MPP	22-215, 22-301, 2	2-305, 22-310, 2	2-315, 22-320, 22	-325, 22-330, 22-335, 22-340, and 22-345
SECTIONS AFFECTED	22-003, 22-201, 2 REPEAL	2-202, and 22-210	0	,
2. TYPE OF FILING				
Regular Rulemaking (Gov. Code, § 11346)	Resubmittal	Changes Without Re		Emergency (Gov. Code, § 11346.1(b))
X Certificate of Compliance: The prior to, or within 120 days of, the			plied with the provisions of C	Government Code §§ 11346.4 - 11346
Print Only	Other (specify)			
3. DATE(S) OF AVAILABILITY OF MODIFIED F			_	1 45)
April 6, 1995 to Apri 4. EFFECTIVE DATE OF REGULATORY CHAI		See Attache	ea	
Effective 30th day after filing with Secretary of State	X Effective on filing with Secretary of State	Effective other (Specify)		
5. CHECK IF THESE REGULATIONS REQUIR Department of Finance (Form S'		Fair Political Practice		State Fire Marshal
Other (Specify)				
6. CONTACT PERSON				TELEPHONE NUMBER
Frank Vitulli, Chief,	Office of Regula	tions Developmen	t	657-2586
I certify that the attached form, that the information action, or a designee, of	n specified on this form	n is true and correct, ar	nd that I am the head o	f the agency taking this
SIGNATURE OF AGENCY HEAD OR DESIGN				MAY ~ 5 (995
TYPEO NAME AND TITLE OF SIGNATORY				411.0
ELOISE ANDERSON, Dire	ctor			

NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

RESUBMITTAL OF DISAPPROVED OR WITHDRAWN REGULATIONS

When resubmitting previously disapproved or withdrawn regulations to OAL for review, use a new STD. 400 and fill out Part B, including the signed certification. Enter the number of the previously disapproved or withdrawn filing in the box marked

"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

3. April 6, 1995 to April 21, 1995 Renotice

Sections Amended

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22-201.5(a)(3)
22-202
22-210.1
22-215.21 and .3
22-301
22-305.5(b)
22-315
22-320.2 et seq. and .3 et seq.
22-325
22-330.1 and .4
22-335.2 and .3
22-350.6
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.1 (Continued)

.11 There is no right to a state hearing regarding a Food Stamp or AFDC administrative disqualification, unless the issue is the CWD's method of implementing a Food Stamp or AFDC administrative disqualification hearing decision. (See Division 22, Chapters 22-200 and 22-300, Division 20, Chapter 20-300, and Division 63, Section 63-805.)

Authority Cited: Sections 10553, 10554, and 10604, Welfare and Institutions Code.

Reference:

Sections 10553, 10554, 10613, 11209, and 11511(a), Welfare and Institutions Code; and 45 CFR 235.112(c)(2) and 45 CFR

255.4(j)(1) and 256.4(b).

22-201

22-201 GENERAL PROVISIONS

- .1 An administrative disqualification hearing (ADH) at the state level shall be initiated when a CWD informs the Administrative Adjudications Division (AAD) of the California Department of Social Services (CDSS) that clear and convincing documentary evidence in the CWD's possession indicates that an administrative disqualification is appropriate.
 - .11 The Department shall then assume responsibility for the overall administration of the disqualification hearing process and the conduct of each hearing at the state level.
- .2 An ADH at the local level shall be initiated when a CWD informs the CWD-designated unit responsible for scheduling and conducting an ADH that clear and convincing documentary evidence in the CWD's possession indicates that an administrative disqualification is appropriate.
 - .21 The CWD shall assume responsibility for the overall administration of the disqualification hearing process and the conduct of each hearing at the local level.

.3 (Continued)

- .31 (Continued)
- .32 (Continued)
- .33 (Continued)

.4 (Continued)

- .41 (Continued)
 - .411 Administrative Disqualification Decision Means the written decision issued by the Administrative Law Judge (ALJ) after an administrative disqualification hearing at the state level and by the CWD-designated hearing official after a local level hearing.
 - .412 Notice of Hearing Means the written notification which initiates an administrative disqualification hearing (see Section 22-202.3) and is provided as follows:
 - (a) At the state level, CDSS shall provide written notification to the respondent and the CWD and
 - (b) At the local level, the CWD shall provide written notification to the respondent and the CWD-designated unit responsible for presenting the case at the local level hearing.

.413 (Continued)

- .5 Procedures Governing State Hearings Also Applicable to Administrative Disqualification Hearings
 - (a) The following provisions of Chapter 22-000 shall be applicable to administrative disqualification hearings: (Continued)
 - (3) Section 22-023.123 relating to assignment of county representatives; (Continued)
 - (7) Section 22-049 relating to general rules and procedures at the hearing, excluding .11; (Continued)
 - (11) (Continued)
 - (12) (Continued)
 - (13) (Continued)
- .6 Both the CWD's representative and the claimant's representative shall have the right to designate another person to be present and advise the representative throughout the hearing. This individual may be a witness who testifies on behalf of the county or claimant and in this circumstance, Section 22-049.12 would not apply. If this individual is a witness, then he/she may not be present as an adviser until after he/she has testified.

Reference: 7 CFR 273.16(e)(10)(i).

- .1 (Continued)
 - .11 Notify the Chief Administrative Law Judge in writing; and, (Continued)
- .2 The request for a state or local level hearing shall be reviewed and signed by a county supervisory employee to ensure that clear and convincing evidence exists for an IPV hearing request.
- .23 CDSS shall monitor that the requests sent pursuant to Sections 22-201.1 and <u>.2</u> are appropriate for IPV consideration in that they represent cases in which clear and convincing evidence has been identified to warrant the scheduling of such hearing.
 - .231 Upon receipt of the notification request described in Section 22-201.1 or .2, the Department or the CWD shall schedule an administrative disqualification hearing.
- . 14 Waiver of Right to an Administrative Disqualification Hearing
 - .341 A waiver request form shall be sent with the Notice required by Section 22-202.45 to the respondent. This waiver request form shall be a written notification which informs respondent of the possibility of waiving the ADH. This waiver request form shall include:
 - (a) The information that the respondent has 20 days from the date of the notice to submit the signed waiver form to the Department in the case of a state level hearing or to the CWD in the case of a local level hearing. If the respondent fails to sign and return the waiver request to the Department within 20 days from the date of the notice, the ADH shall be held as scheduled. (Continued)
 - (1) A statement in bold print that says, "DO NOT SIGN THIS IF YOU DO NOT KNOW WHAT IT MEANS!."
 - .342 If the respondent voluntarily and knowingly submits a signed waiver of his/her right to an ADH within the 20-day period to the Department in a state level hearing, or to the CWD in a local level hearing, the Department in a state level hearing, or the CWD in a local level hearing, shall submit a signed copy of the waiver to the CWD and shall notify the CWD to initiate the notification of disqualification action and imposition of disqualification penalties in accordance with CDSS' Manual of Policies and Procedures, Division 20, Sections 20-300.24, .3, and .4.
 - .343 (Continued)

- .344 The CWD may shall inform the respondent by written notice that a request for a state/local level ADH has been filed by the CWD and that he/she may waive the right to an ADH through a pre-hearing waiver process.
 - .7441 The written notice shall be provided in person or by mail pursuant to Section 22-202.4511 et seq., except Section 22-202.4511(a).
 - (a) The notice may shall contain a request for the respondent to contact a specified representative of the CWD to set a meeting date, time, and location.
 - .3442 The waiver shall be as described in Section 22-202.34.
 - (a) The notice shall contain language that allows the respondent to rescind the waiver if, after signing the waiver the respondent changes his/her mind and it is within the 20-day period for returning the waiver to the Department or the CWD in accordance with Section 22-202.41(a).
 - .443 The CWD shall not use threats, coercion, or the promise of leniency with respect to criminal prosecution in obtaining the respondent's signature on a waiver.
- .45 (Continued)
 - .451 (Continued)

.4511 (Continued)

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: 7 CFR 273.16(e) and (f).

Amend Section 22-210.1 to read:

22-210 HEARING PROCEDURE (Continued)

22-210

- .1 The Mearing Local level and state level IPV ADHs shall be conducted pursuant to the applicable provisions of Chapter 22-000. (Continued)
 - .12 The hearing shall be conducted by an impartial ALJ at the state level, or an impartial hearing official at the local level who has not had previous involvement in the case.
 - .13 The ALJ and local level hearing officials shall prepare fair, impartial, and independent decisions.

HANDBOOK BEGINS HERE

.124 See Section 22-330 for instances when a Food Stamp ADH can be combined with an AFDC ADH.

HANDBOOK ENDS HERE

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

<u>Reference:</u> 7 CFR 273.16.

22-215 LOCAL LEVEL HEARINGS

- 22-215
- .1 Subject to CDSS approval of a county's ADH plan, counties may choose to provide ADHs at the local level with a right to appeal to a state level de novo hearing.
- .2 If a local level disqualification hearing determines that a household member committed an IPV, the notification of hearing decision specified in Section 22-220.2 shall also inform the household member:
 - .21 Of the right to appeal the local level decision within 125 days after the f#### of date the notice has been sent to the respondent by the county (see Section 22-340.6);
 - .22 Of the date the disqualification shall take effect unless a state level hearing is requested; and
 - .23 That benefits shall be continued pending a state level de novo hearing if the household is otherwise eligible.
- .4 The local level hearing decision shall be made within 90 days from the date of the notice scheduling the hearing.
- .5 When a local level decision is appealed, CDSS shall conduct the state level hearing, arrive at a decision, and notify the household member and local agency of the decision within 60 days of the date the household member appealed its case.
 - .51 The local level decision shall not be taken into consideration by the state ALJ in making the final determination.

4 . 1

.6 In all other respects, local level disqualification hearings shall be handled in accordance with the procedures specified in this chapter for state level hearings.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: 7 CFR 273.16(e)(10)(i).

Amend Section 22-301 to read:

CHAPTER 22-300 AFDC ADMINISTRATIVE DISQUALIFICATION HEARINGS - GENERAL

22-301 ADMINISTRATIVE DISQUALIFICATION HEARINGS (ADHs) - GENERAL

22-301

- .1 The regulations in this chapter shall apply to hearings resulting from a county welfare department's (CWD's) determination, supported by documentation in the CWD's possession, that an individual has allegedly committed an intentional program violation (IPV) in the AFDC program as set forth in the California Department of Social Services (CDSS) Manual of Policies and Procedures, Division 20, Chapter 20-350.
- .2 Administrative disqualification hearings are distinct from the state hearings discussed in Chapter 22-000.
- Those cases in which the prosecuting authority has determined (a) that facts do not warrant prosecution, or (b) those cases previously referred for prosecution and declined, shall be returned to the CWD and the CWD shall initiate referral action for an ADH through CDSS, in accordance with CDSS Manual of Policies and Procedures, Division 22.
- The CWD shall not initiate an ADH against an accused individual whose case is currently being referred for prosecution or subsequent to any action taken against the accused individual by the prosecutor or court of the appropriate jurisdiction, if the factual issues of the case arise out of the same or related circumstances.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: 7 CFR 273.16(a)(1) and 45 CFR 235.112(a).

22-305 GENERAL PROVISIONS

22-305

- .1 An ADH at the state level shall be initiated when a CWD informs the Department that sufficient evidence in the CWD's possession indicates that an administrative disgualification is appropriate.
 - .11 The Department shall then assume responsibility for the overall administration of the disqualification hearing process and the conduct of each hearing at the state level.
- .2 An ADH at the local level shall be initiated when a CWD informs the CWD-designated unit responsible for scheduling and conducting an ADH that clear and convincing evidence in the CWD's possession indicates that an administrative disqualification is appropriate.
 - .21 The CWD shall assume responsibility for the overall administration of the disqualification hearing process and the conduct of each hearing at the local level.
- .3 In both state and local level hearings, the CWD shall remain responsible for:
 - .31 Investigating the case and assisting the respondent prior to the hearing;
 - .32 Presenting the CWD's position during the hearing; and
 - .33 Complying with the hearing decision.

.4 Definitions

The definitions in Section 22-001 shall apply unless they are specifically provided for in this chapter. The following additional definitions, in alphabetical order, shall apply wherever the terms are used in this chapter:

- .41 Administrative Disqualification Decision Means the written decision issued by the Administrative Law Judge (ALJ) after an ADH at the state level and by the CWD-designated hearing official after a local level hearing.
- .42 Intentional Program Violation (IPV) Means an action by an individual, for the purpose of establishing or maintaining the family's eligibility for AFDC or for increasing or preventing a reduction in the amount of the grant, which is intentionally:
 - .421 A false or misleading statement or misrepresentation, concealment, or withholding of facts, or
 - .422 Any act intended to mislead, misrepresent, conceal, or withhold facts or propound a falsity.

HANDBOOK BEGINS HERE

- (a) To determine what constitutes an IPV, CDSS recognizes a distinction in the following:
 - (1) Intentional concealment or willful misrepresentation which may result in an IPV.

EXAMPLE: In completing the Monthly Eligibility Reports (CA 7), respondent checks the box indicating family has no income. Respondent also checks box indicating that no one had started employment that month. County evidence indicates respondent did start work during the month it was reported that no one had started work. Respondent also did receive earnings in each of the months under review.

(2) Incorrect representation, negligence, or omissions because of a mistake or a lack of understanding of eligibility requirements which do not result in an IPV.

EXAMPLE: Respondent reports that he/she began employment the last week of the reporting month, and that he/she will be paid every two weeks. Respondent completes the next CA 7 and checks the :"No" box for income received in the month.

(3) The CWD's omission, neglect, or error in explaining requirements for assistance or in processing information, which does not result in an IPV.

EXAMPLE: Respondent completes CA 7 without answering question relating to household's receipt of income during the month. Respondent does this for five months and CWD fails to return the CA 7 as incomplete. Evidence establishes respondent had income in each of these months.

HANDBOOK ENDS HERE

- .43 Notice of Hearing Means the written notification, as specified in Section 22-315.5, which initiates an ADH and is provided as follows:
 - .431 At the state level, CDSS shall provide written notification to the respondent and the CWD and
 - .432 At the local level, the CWD shall provide written notification to the respondent and the CWD-designated unit responsible for presenting the case at the local level hearing.

- .44 Respondent Means the member(s) of the assistance unit (AU) who the CWD has determined may be subject to administrative disqualification. To the extent that the provisions of Chapter 22-000 relating to state hearings apply to administrative disqualification hearings, all references to "claimant" in such regulations shall be deemed to refer to "respondent" for purposes of the ADH.
- .45 Sufficient Evidence Means the documentary and other evidence in the CWD's possession that the CWD determines may establish that the respondent has committed an IPV based on a preponderance of evidence as the standard of proof.
- .5 The following provisions of Chapter 22-000, State Hearings General, shall be applicable to ADHs:
 - (a) Section 22-002 relating to determination of time limit;
 - (b) Section 22-010 relating to #\$\$1\$php\phi of authorized representatives;
 - (c) Section 22-023.13 relating to assignment of county representatives;
 - (d) Sections 22-023.2 and .3 relating to duties of county representatives prior to and at the hearing;
 - (e) Section 22-027 relating to situations where the hearing is held in a county other than the responsible county;
 - (f) Sections 22-045.1 and .2 relating to the time and place of the hearing;
 - (g) Section 22-049 relating to general rules and procedures at the hearing, excluding .11;
 - (h) Section 22-050 relating to evidence;
 - (i) Section 22-051 relating to the examination of records and issuance of subpoenas;
 - (j) Section 22-052 relating to witness fees and mileage;
 - (k) Section 22-053.2 relating to continuances for additional evidence;
 - (1) Section 22-055 relating to disqualification of ALJs;
 - (m) Section 22-059 relating to communications after the hearing.

Reference: 45 CFR 235.112(b) and 45 CFR 235.113(b)(2).

The CWD shall provide all applicants with a written notice of the disqualification penalties for IPVs under this section at the time of the application. Respondents who are recipients on the date of approval of the State Plan amendment implementing this optional program must be provided a written notice no later than the next redetermination for AFDC eligibility.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: 45 CFR 235.112(d) and 45 CFR 235.113(b)(3).

22-315 NOTICE OF ADMINISTRATIVE DISQUALIFICATION HEARING

- .1 When the CWD determines, based on sufficient evidence, that a respondent is subject to disqualification from the AFDC program because of a suspected IPV and determines the respondent should be disqualified in accordance with Chapter 20-300, the CWD shall send the completed request for hearing to:
 - .11 The Administrative Adjudications Division of CDSS for the scheduling of an ADH at the state level; or
 - .12 The CWD-designated unit for the scheduling of an ADH at the local level.
- .2 The request specified in Section 22-315.1 shall set forth the charges against the respondent, contain a summary of the evidence, and identify the specific disqualification period believed to be appropriate.
 - .21 The notification shall be reviewed and signed by a county supervisory employee to ensure that sufficient evidence exists for an IPV hearing request.
- .3 CDSS shall monitor that the requests sent pursuant to Section 22-315.1 are appropriate for IPV consideration in that they represent cases in which sufficient evidence has been identified to warrant the scheduling of such hearings.
- .4 The ALJ in the state level hearing, or the hearing official in the local level hearing, shall base the determination of an IPV on the preponderance of evidence that is in the hearing record.
- .5 CDSS for the state level hearing, or the CWD for the local level hearing, shall ptotide send a written notice to the respondent alleged to have committed the IPV which is received by the respondent at least 30 days prior to the date of the disqualification hearing. Which The notice shall be either personally served or sent by first class regular mail. If no proof of receipt is obtained, evidence of nonreceipt by the household member shall be considered good cause for not appearing at the hearing. The notice shall include the following:
 - (a) The date, time and location of the hearings;
 - (b) The charge(s) against the respondent:
 - (c) A summary of the evidence, and how and where the evidence can be examined;
 - (d) A warning that the respondent's failure to appear without good cause shall result in a decision by the ALJ or hearing official based solely on the information provided by the CWD at the hearing;

- (e) A statement that the respondent may request a postponement of the hearing as specified in Section 22-325 provided that such request is made to CDSS, or CWD in the case of a local level hearing, at least 10 days in advance of the scheduled hearing;
- A statement that the respondent may request a postponement within 10 days of the hearing if good cause is present;
- (fg) A statement that the respondent has 10 days from the date of the scheduled hearing to present to CDSS at the state level, or CWD in the case of a local level hearing, good cause for failure to appear in order to receive a new hearing/;
- (<u>\$\phi\$</u>) A description of the penalties that can result from a determination that the respondent has committed an IPV and a statement of which penalty is applicable to the respondent/;
- (Mi) A statement that the hearing does not preclude the county or state government from prosecuting the respondent for an IPV in a civil or criminal court action, or from collecting an overpayment;
- (11) A listing of individuals or organizations that provide free legal representation to individuals alleged to have committed IPVs/;
- (1/k) An explanation that the respondent may waive his/her right to appear at an ADH (see Section 22-320); and
- (<u>Kl</u>) A statement of the respondent's right to remain silent concerning the charge(s) and that anything said or signed by the respondent concerning the charge(s) may be used against him/her in a court of law.

Reference: 45 CFR 235.113(b)(2), (b)(3)(ii) ii0, and (b)(8).

22-320

- .1 The respondent shall be allowed to waive his/her right to appear at an ADH.
- .2 The respondent shall be informed by the written notice as specified in Section 22-315.5(jk) of the opportunity to waive his/her right to a hearing.
 - .21 The statement that the respondent may waive the right to appear at an ADH shall include at a minimum:
 - .211 The information that the respondent has 20 days from the date of the notice to submit the signed waiver form to the Department in the case of a state level hearing, or to the CWD in the case of a local level hearing. If the respondent fails to sign and return the waiver request within such time period, the ADH shall be held as scheduled.
 - .212 A signature block for the respondent's and the Mødø of Mødø¢Mølø/s caretaker relative's signature.
 - .213 A statement of the respondent's right to remain silent concerning the charge(s) and that anything said or signed by the respondent concerning the charge(s) may be used against him or her in a court of law;
 - .214 A statement of the fact that waiver of the respondent's right to appear at a disqualification hearing #111 may result in a disqualification penalty and a reduction in the assistance payment for the appropriate period even if the respondent does not admit to the facts as presented by the CWD; and
 - .215 A statement specifying that the respondent has an opportunity to specify whether or not he/she admits to the facts as presented by the CWD.
 - .216 A statement in bold print that says, "DO NOT SIGN THIS IF YOU DO NOT KNOW WHAT IT MEANS!."
- .3 The CWD #Af shall inform the respondent by written notice that a request for a state/local level ADH has been filed by the CWD and that he/she may waive the right to an ADH through a pre-hearing waiver process.
 - .31 The written notice shall be provided in person or by mail pursuant to Section 22-315.5 et seq., except Section 22-315.5(a).

- .311 The notice may shall contain a request for the respondent to contact a specified representative of the CWD to set a meeting date, time, and location.
- .32 The waiver shall be as described in Section 22-320.21.
 - The notice shall contain language that allows the respondent to rescind the waiver if, after signing the waiver the respondent changes his/her mind and it is within the 20-day period for returning the waiver to the Department or the CWD in accordance with Section 22-320.211.
- The CWD shall not use threats, coercion, or the promise of leniency with respect to criminal prosecution in obtaining the respondent's signature on a waiver.
- .4 When the respondent waives his/her right to appear at a disqualification hearing, the disqualification and appropriate reduction of assistance shall result regardless of whether the respondent admits or denies the charges.
 - .41 CDSS, or the CWD in the case of a local level hearing, shall send a written notice informing the respondent of the period of disqualification (which shall begin no later than the first day of the second month which follows the date of notice), and the amount of payment the unit will receive during the disqualification period.
 - .42 If a case has been terminated the disqualification period shall be imposed after a reapplication for AFDC assistance is approved.

Reference: 7 CFR 273.16(e)(10); 7 CFR 273.16(f)(1); and 45 CFR 235.113(c)(1), (2), and (3).

22-325 POSTPONEMENTS 22-325

.1 An ADH at both the state and local level shall be <u>automatically</u> postponed at the respondent's request provided that the request for postponement is made at least 10 days in advance of the date of the scheduled disqualification hearing.

- <u>.11</u> For written requests, the letter must be postmarked at least 10 days in advance of the hearing date.
- <u>for verbal requests, the controlling date is the date the respondent initially called and spoke with a worker to request a postponement.</u>
- 2 Postponements shall be allowed within the 10-day period prior to the hearing date but shall be granted only on the basis of good cause being present as per Section 22-053.16.
- .23 The hearing shall not be postponed for more than a total of 30 days.
- .34 The number of postponements shall be limited to one.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: 45 CFR 235.113(b)(4).

- .1 Local level and state level IPV ADHs shall be conducted pursuant to the applicable provisions of Chapter 22-000.
 - .11 The hearing shall be conducted by an impartial ALJ at the state level, or an impartial hearing official at the local level who has not had previous involvement in the case.
 - .12 The ALJ and local level hearing officials shall prepare fair, impartial, and independent decisions.
- .2 Medical assessments shall be obtained at the expense of CDSS and made part of the record if the ALJ or hearing official considers it necessary.
- .3 The respondent or his/her representative shall have adequate opportunity to:
 - .31 Examine the contents of the case file, and all documents and records to be used at the hearing by CDSS at the state level, or the CWD at the local level, at a reasonable time before the date of the hearing, and during the hearing;
 - .32 Present the case himself/herself or with the aid of an authorized representative;
 - .33 Bring witnesses;
 - .34 Establish all pertinent facts and circumstances:
 - .35 Advance any arguments without undue influence; and
 - .36 Question or refute any testimony or evidence, including the opportunity to confront and cross-examine adverse witnesses.
- .4 CDSS at the state level, or the CWD at the local level, shall combine an respondent's Food Stamp and AFDC ADHs into a single hearing if/
 - /41 Tthe factual issues arise out of the same or related circumstances./
 - /42 The AV teceives otiot whilten notice that the heatings will be combined!
- .5 CDSS at the state level may consolidate a respondent's state hearing governed by 45 CFR 205.10 with a disqualification hearing based on the same or related circumstances provided that the respondent receives prior written notice of the consolidation.

- .51 If the hearings are combined, CDSS shall follow the time frames for conducting ADHs.
- .6 Both the CWD and the claimant shall have the right to have a representative present throughout the hearing.
- .7 Both the CWD's representative and the claimant's representative as specified in Section 22-330.6 shall have the right to designate another person to be present and advise the representative throughout the hearing. This individual may be a witness who testifies on behalf of the county or claimant and, in this circumstance, Section 22-049.12 would not apply. If this individual is a witness, then he/she may not be present as an adviser until after he/she has testified.

Reference: 45 CFR 235.112(a) and 45 CFR 235.113(b)(1), (5), (6), and (7).

22-335 LOCAL LEVEL HEARINGS

- .1 Subject to CDSS approval of a county's ADH plan, counties may choose to provide ADHs at the local level with a right to appeal to a state level de novo hearing.
- .2 If a local level disqualification hearing determines that a household member committed an IPV, the notification of hearing decision specified in Section 22-340.7 shall also inform the household member:

 - .22 Of the date the disqualification will take effect unless a state level hearing is requested; and
 - .23 That benefits shall be continued pending a state level hearing if the household is otherwise eligible. I and
 - /24 That it he/she of his/het authotized teptesentative fails to appeat hoto that it he/she of his/het authotized teptesentative fails to appeat de noto heating shall be dishissed! In this situation the Iocal level de decision shall temain in effect as it has not been set aside by a later state level heating!
- If the household member appeals the local level decision, the advance notice of the state level hearing, as specified in Section 22-315 shall be provided mailed to the respondent at least 105 days in advance prior to the date of the scheduled state level hearing. And shall also intorn the household wenter that the local nearing and shall be dishisted if the household of its representative fails to appear without good cause for the hearing.
- .4 When a local level decision is appealed, CDSS shall conduct the state level de novo hearing, arrive at a decision, and notify the household member and local agency of the decision within 60 days of the date the household member appealed its case.
 - .41 The local level decision shall not be taken into consideration by the state ALJ in making the final determination.
- .5 In all other respects, local level disqualification hearings shall be handled in accordance with the procedures specified in this chapter for state level hearings.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: 7 CFR 273.16(e)(10)(i); 45 CFR 235.113(b), (b)(2), (b)(11), and (b)(12).

- .1 Decisions made by the ALJ or hearing official shall be based exclusively on evidence and other material introduced in the hearing record.
 - .11 The transcript or recording of testimony, exhibits, or official reports introduced at the hearing, together with all papers and requests filed in the proceeding, and the decision of the ALJ or hearing official shall be made available to the respondent or to his/her representative at a reasonable time and place.
- .2 After the hearing has been closed, the ALJ or hearing official shall prepare a written decision.
- .3 Decisions by the hearing authority shall:
 - In the event of a local level hearing, consist of a decision memorandum summarizing the facts and identifying the regulations supporting the decision;
 - .32 In the event of any CDSS hearing, specify the reasons for the decision and identify the supporting evidence and regulations; and
 - .33 Be made within 90 days from the date of the notice scheduling the hearing. (Sixty days from the request for a state level de novo hearing after a local level hearing decision.)
- .4 The Director or Chief Administrative Law Judge or his/her designee shall have the authority to reject the proposed decision of the ALJ and prepare a separate decision based upon the record in the case or to order an additional hearing.
- .5 A copy of the hearing decision shall be mailed to the respondent and to the
- .6 The CWD may not disqualify a respondent unless the decision of the ALJ finds that the respondent has committed an IPV or the respondent fails to request a state level de novo hearing within 125 days of the notice of an adverse local level hearing decision that proposes to disqualify the respondent has been sent to the respondent.
 - .61 The CWD is not precluded from discontinuing, terminating, suspending, or reducing assistance, or changing the manner or form of payment to a protective, vendor, or two-party payment for other reasons.

HANDBOOK BEGINS HERE

.611 For example, the CWD may have facts which substantiate that the AU failed to report a change in circumstances even though the CWD has not yet demonstrated that the failure to report was an IPV.

HANDBOOK ENDS HERE

- .7 If the decision of the ALJ, or hearing official at the local level hearing, finds that the respondent committed an IPV, the CWD shall provide a written notice to the respondent prior to disqualification.
 - .71 The notice shall inform the respondent of the following:
 - .711 The decision and the reason for the decision;
 - .712 The period of disqualification (which shall begin no later than the first day of the second month which follows the date of notice); and
 - .713 The amount of payment the AU will receive during the disqualification period.
 - .72 In cases of a respondent's disqualification resulting from a prior receipt of assistance, the disqualification shall be postponed until after a reapplication for AFDC assistance is approved.
- .8 If the respondent does not appear at the state level or local level hearing, a reopening of the case may be requested within 10 days of the hearing by the respondent. If good cause is established, a new hearing shall be scheduled.

Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code.

Reference: 45 CFR 235.113(b)(3)(ii)(F) and (b)(8) through (12).

- .1 A respondent who, on the basis of a plea of guilty or nolo contendere or otherwise, is found to have committed an IPV pursuant to this chapter by a state or local level ADH or by a state or federal court shall be treated in the following manner:
 - .11 The CWD shall not take the respondent's needs into account when determining the AU's need and amount of assistance.
 - .12 Any resources and income of the disqualified respondent shall be considered available to the AU. The respondent's needs shall not be taken into account for six months for the first occasion of any such offense, one year for a second offense, and permanently for a third offense.
- .2 Any period for which a disqualification penalty is imposed shall remain in effect without possibility of an administrative stay unless, and until, the finding upon which the penalty was based is subsequently reversed by a court of appropriate jurisdiction; but in no event shall the duration of the period for which such penalty is imposed be subject to review.
- .3 A disqualification penalty imposed on a respondent by one Title IV-A (Social Security Act) state agency may be used in determining the appropriate disqualification penalty for the individual by another Title IV-A state agency.
 - .31 When a respondent with a prior violation(s) moves from one state to another and has been found to have committed an IPV(s), the state agency may impose the penalty based on the number of such violations committed in other states.
 - .32 A state may establish interstate agreements with other states to share appropriate information.
- .4 In cases where a disqualification penalty and other sanctions or penalties apply:
 - .41 The disqualification penalties in Section 22-345 shall be in addition to, and cannot be substituted for, any other sanctions or penalties which may be imposed by law for the same offenses; and
 - .42 The disqualification penalties imposed under this program only affect the respondent concerned and cannot substitute for other sanctions under the AFDC program (e.g., failure to participate in JOBS or to cooperate in obtaining child support).

Reference: 45 CFR 235.112(c)(1) through (3).

STATE OF CALIFORNIAOFFICE OF ADMINIS		UBMISSION	(See instructions on reverse)	For use by Secretary of State only				
STD. 400 (REV. 2-91) AGENCY	F 0 1 3 1		AGENCY FILE NOMEGA (II My)					
	California Department of Social Services ORD#0495-15							
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Housing Placement Pr	rograms	4. AGENCY CONTACT PERSO		TELEPHONE NUMBER				
Notice re Proposed Regulatory Action	Other	4. AGENCY CONTACT PERSO	N	TELEPHONE NUMBER				
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B. SUBMISSION OF REGU	Modified Complete	Withdrawn	etions)					
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MPP	11-410							
SECTIONS	11-400							
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2. TYPE OF FILING								
Regular Rulemaking (Gov. Code, § 11346)	Resubmittal	Changes Without Re (Cal. Code Regs., tit	de 1, § 100)	X Emergency (Gov. Code, § 11346.1(b))				
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NOTICE PUBLICATION/REGULATIONS/SUBMISSION

STD. 400 (REV. 2-91) (REVERSE)

INSTRUCTIONS FOR PUBLICATION OF NOTICE AND SUBMISSION OF REGULATIONS

The revised form STD. 400 replaces form STD. 398 (REV. 3/85) (Face Sheet for Filing Notice of Proposed Regulatory Action in the California Administrative Notice Register) and form STD. 400 (REV. 8/85) (Face Sheet for Filing Administrative Regulations with the Office of Administrative Law). Use the new form STD. 400 for submitting notices for publication and regulations for Office of Administrative Law (OAL) review.

ALL FILINGS

Enter the agency name and agency file number, if any.

NOTICES

Complete Part A when submitting a notice to OAL for publication in the California Regulatory Notice Register. Submit two (2) copies of the STD. 400 with four (4) copies of the notice and, if a notice of proposed regulatory action, one copy each of the complete text of the regulations, the statement of reasons and a list of small businesses to whom the notice will be mailed, if any. If the notice is approved, OAL will return the STD. 400 with a copy of the notice and will check "Approved as Submitted" or "Approved as Modified" and place a number in the box marked "Notice File Number." If the notice is disapproved or withdrawn, that will also be indicated in the space marked "Action on Proposed Notice." Please submit a new form STD. 400 when resubmitting the notice.

REGULATIONS

When submitting regulations to OAL for review, fill out STD. 400, Part B. Use the form that was previously submitted with the notice of proposed regulatory action which contains the "Notice File Number" assigned, or, if a new STD. 400 is used, please include the previously assigned number in the box marked "Notice File Number." In filling out Part B, be sure to complete the certification including the date signed, the title and typed name of the signatory. The following must be submitted when filing regulations: seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification) and the complete rulemaking file with index and sworn statement. (See Government Code § 11347.3 for rulemaking file contents.)

RESUBMITTAL OF DISAPPROVED OR WITHDRAWN REGULATIONS

When resubmitting previously disapproved or withdrawn regulations to OAL for review, use a new STD. 400 and fill out Part B, including the signed certification. Enter the number of the previously disapproved or withdrawn filing in the box marked

"Previous Regulatory Action Number" at the top of the form and submit seven (7) copies of the regulation to OAL with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). Be sure to include an index, sworn statement, and (if returned to the agency) the complete rulemaking file. (See Government Code §§ 11349.4 and 11347.3 for more specific requirements.)

EMERGENCY REGULATIONS

Fill out only Part B, including the signed certification, and submit seven (7) copies of the regulations with a copy of the STD. 400 attached to the front of each (one copy must bear an original signature on the certification). (See Government Code § 11346.1 for other requirements.)

NOTICE FOLLOWING EMERGENCY ACTION

When submitting a notice of proposed regulatory action after an emergency filing, use a new STD. 400 and complete Part A only. Please insert the OAL number for the original emergency filing in the box marked "Emergency Number" at the top of the form. OAL will return the STD. 400 with the notice upon approval or disapproval. If the notice is disapproved, please fill out a new form when resubmitting for publication.

CERTIFICATE OF COMPLIANCE

When filing the certificate of compliance for emergency regulations, fill out Part B on the form that was previously submitted with the notice, or, if a new STD. 400 is used, please include the previously assigned numbers in the boxes marked "Notice File Number" and "Emergency Number." The materials indicated in these instructions for "REGULATIONS" must also be submitted.

EMERGENCY REGULATIONS - READOPTION

When submitting previously approved emergency regulations for readoption, use a new STD. 400 and fill out Part B, including the signed certification, and enter the OAL number of the original emergency filing in the box marked "Emergency Number" at the top of the form.

If you have any questions regarding this form or the procedure for filing notices or submitting regulations to OAL for review, please contact the Office of Administrative Law at (916) 323-6225 or ATSS 473-6225.

Amend Section 11-400t, to read:

11-400 AFDC-FOSTER CARE RATES (Continued)

11-400

t.(3) Transitional Housing Placement Program - an independent living training program for youth as specified in Welfare and Institutions Code Section 16522.

HANDBOOK BEGINS HERE

The term transitional housing placement program is defined in Welfare and Institutions Code Sections 16522(a), (b) and (c) as follows:

"The State Department of Social Services shall develop programs in three counties upon the request of the county board of supervisors, to licensed private, nonprofit, or county operated facilities to provide transitional housing placement program services to persons at least 17 years old, and not more than 18 years old unless they satisfy the requirements of Section 11403, who are in out-of-home placement under the supervision of the County Department of Social Services or the County Probation Department, and who are participating in an independent living program. Transitional housing placement program services shall include any of the following:

- Programs in which one or more participants in the program live in an apartment with an adult employee of the licensee.
- (b) Programs in which a participant lives independently in an apartment rented or leased by the licensee located in a building in which one or more adult employees of the licensee reside and provide supervision.
- Programs in which a participant lives independently in an apartment rented or leased by a licensee under the supervision of the licensee if the State Department of Social Services provides approval."

HANDBOOK ENDS HERE

Authority Cited: Sections 10553, 10554, 11462(i) and (j), and 11466.1, Welfare and Institutions Code and Chapter 1294, Statutes of 1989, Section 23.

Reference: Section 1502(a)(1), Health and Safety Code, Section 3353 of the California Labor Code, Sections 10852, 11226, 11228, 11230, 11231, 11232, 11233, 11234, 11235, 11236, 11400(h), 11460, 11462, 11462.03, 11466.1, 11466.2, 11466.22, 11466.3, 11466.31, 11466.33, 11466.34, 11468, 11468.6, 16522(a), (b), and (c), and 18350, Welfare and Institutions Code, Assembly Bill 2129,

Chapter 1089, Statutes of 1993, Senate Bill 415, Chapter 950, Statutes of 1993; The Classification of Group Home Program Under the Standardized Schedule of Rate System Report, August 30, 1989, and Title 8, California Code of Regulations, Section 11050, Industrial Welfare Commission Order 5-89.

Adopt Section 11-410 to read:

2. 6 3 5

11-410 TRANSITIONAL HOUSING PLACEMENT PROGRAM RATES

11-410

Participating counties shall establish a rate for transitional housing placement programs and the rates shall not exceed the aggregate placement costs for these children if they had not participated in the transitional housing placement programs in accordance with Welfare and Institutions Code Section 11460.1(a).

HANDBOOK BEGINS HERE

Welfare and Institutions Code Section 11460.1(a) states the following:

"The Department shall develop a ratesetting system for licensed community care facilities participating in transitional housing placement programs, as defined by Section 16522, and as described by Section 1559.110 of the Health and Safety Code. The rates shall not exceed the aggregate placement costs for these children if they had not participated in the transitional housing placement program."

HANDBOOK ENDS HERE

Authority Cited: Sections 10553, 10554 and 11460.1, Welfare and Institutions

Code; and Health and Safety Code Section 1559.125.

Reference: Section 16522.3, Welfare and Institutions Code; and Health and

Safety Code Section 1559.110.